First Peoples Child & Family Review

An Interdisciplinary Journal Honoring the Voices, Perspectives and Knowledges of First Peoples through Research, Critical Analyses, Stories, Standpoints and Media Reviews

Volume 7, Number 1, 2012, pp. 8-28

Aboriginal Youth Gangs in Canada: (de)constructing an epidemic

Raven Sinclair[a], and Jana Grekul[b]

[a] Associate Professor, Faculty of Social Work, University of Regina, Saskatoon, SK, Canada

[b] Associate Professor, Faculty of Sociology, University of Alberta, Edmonton, AB, Canada

Abstract

The literature on gang activity in Canada indicates a proliferation of Aboriginal youth gangs, and the research tells us that child welfare involvement is a significant risk factor for gang participation. This article examines the child welfare and youth gang literature, and analyzes the complex interaction of structural factors facing Aboriginal youth in Canada in order to contextualize youth gang involvement within the larger system of social distress facing Aboriginal people. This paper scrutinizes the veracity of youth gang statistics and interrogates the Aboriginal youth gang discourse to discover that, although a problem clearly exists, the scope and substance of the situation in Canada needs to be more thoroughly researched in order to be accurately portrayed.

Introduction

This article arises out of a review requested by the Office of the Federal Interlocutor to examine risk factors related to Aboriginal children in alternative care and subsequent gang involvement. Literature addressing Aboriginal child welfare, criminalization, and gang statistics was explored to ascertain the scope of the problem, and to assess the links to child welfare involvement. In the course of the exploration, an overview of the issue of Aboriginal youth gangs in Canada emerged that leaves us with some insights into the issue, an awareness of where gaps in understanding exist, and ideas for further research.

The context of Aboriginal youth gangs was viewed through a critical structural and historical lens. The critical structural foundation of the analysis encompasses the principles of critical pedagogy and conscientization (Freire, 1972). Critical pedagogy is concerned with helping students develop a higher awareness of conditions of oppression and inequality in order to change the world (Leonard, 1990, cited in Mulally 1997, p. 108), while conscientization is defined as "critical consciousness" (Freire, 1972) about those systems, including the ability to critically analyze and respond. In examining Aboriginal youth issues, a critical perspective directs our attention to the emancipation of youth as an oppressed group, through critique and then action. The critique deconstructs systems of domination and inequality, and action is invested in the transformation of those conditions of inequality (Mullaly, 1997; Kellner, 1989).

Address correspondence to:

Raven Sinclair, 153-111 Research Drive, Saskatoon, SK, S7N 3R2, (306) 644-7372; Email: ravsin@sasktel.net

Acknowledgement: Financial support for the report on which this article is based was provided by the Office of the Federal Interlocutor.

Structuralism reminds us that conditions must be understood within larger, overarching systems, particularly because the systems may be underlying causes for social problems (Weinberg, 2008). Without a critical structural approach, there is a risk that Aboriginal youth will be blamed for their problems. We understand that Aboriginal youth gang involvement has clear antecedents that can be traced back to socio-economic and political inequities, appropriately referred to as a "burden of suffering" (Totten, 2009b) brought about through colonization; in particular, the programs of successive governments to assimilate Aboriginal people into the mainstream body politic (Sinclair, 2007a). The historical lens ensures that we are not "operating in a vacuum" with respect to Aboriginal issues (Duran & Duran, 1995), and a historical analysis situates Aboriginal youth and gang issues within the macro socio-political and economic context that frames contemporary Aboriginal issues. In the words of the Elders, "we have to know where we have been to know where we are going" (Sinclair, 2009, p.19).

At first glance, the literature clearly establishes disruption during developmental or adolescent stages, through parental or guardian neglect or abuse, as a risk factor for gang involvement (Goodwill 2009). The Aboriginal child welfare system, which is a direct consequence of the destruction of families through the Residential School system, also presents a key risk factor to increased Aboriginal youth mental concerns, homelessness, attachment disorders, and juvenile criminality (Dukes et al., 1997; Neckoway et al., 2003; Gilchrist, 1995; Trevethan et al., 2002), as well as low educational attainment, poverty, and suicide (Totten, 2008). All these factors subsequently make Aboriginal youth vulnerable to youth gang recruitment and put them at risk of incarceration, which has been described as a "training ground" for gangs (Mercredi, 2000). These youth issues are further nested within the context of Aboriginal marginalization and oppression, racism, cultural disruption, and the loss of traditional culture and knowledge translation, family and community disruption, as well as poverty, mental health, burgeoning and chronic disease (Adelson, 2005 ; Bennett et al., 2005; Grekul & LaBoucane-Benson, 2007; Sinclair, 2007a; Reading, 2010).

Bennett et al. (2005) remind us that

> socio-economic problems today are so pervasive for First Nations peoples that a 1996 internal Department of Indian and Northern Affairs study found that if the United Nations Human Development Index were applied to First Nations living on reserve they would rank 79th and 80th in the world while at the same time, Canadians as a whole, are ranked number one in the world. (p. 7)

These realities help one to understand the etiology of and structural connections to Aboriginal youth gang involvement. Goodwill (2009) observes that Aboriginal gangs in Canada "could not be discussed without the context of the literature documenting the history and effects of colonialism, as well as Aboriginal culture, resilience and healing" (p. 30). Aboriginal youth gang involvement is inextricably linked to the social distress caused by colonization. Ironically, a current reality is that most Aboriginal people, gang-involved or not, experience many of the same socio-economic antecedents to gang involvement that youth gang members do.

The connection between the aggressions of recent colonial history to contemporary youth issues, as well as family violence and other social pathologies, can be traced through as many

as five generations of family members, reaching back to the early 1800s. Armitage (1995, cited in Bennett et al., 2005) observed that residential schools were effective preparation sites for the institutionalization of prisons and mental health facilities since so many former students ended up there. Since residential schools began closing with increasing frequency into the 1980s, some Aboriginal families now have up to three generations who did not attend the schools. However, most of the current generations have been significantly affected by the child welfare system that emerged in the early 1960s (Sinclair, 2007a).

The Aboriginal Child Welfare System

The child welfare system in Canada developed rapidly as the result of two key events: the gradual closing of residential schools, and the 1951 amendment to the Indian Act that allowed provinces to deal with Aboriginal child welfare issues (Bennett et al., 2005, p. 19). Among the dynamics occurring at the time were the new provincial jurisdictions, a relatively new social work profession, a clash between mainstream and Aboriginal cultures, social problems and disarray stemming from residential schools, and intense poverty and disenfranchisement on reserves (Bennett et al., 2005; Sinclair, 2007a). The introduction of federal transfers through the Canada Assistance Plan in 1966 allowed provinces to invest more energy into child welfare matters, leading to exponential growth in the Aboriginal child welfare arena (Sinclair, 2007b). This translated into high numbers of relinquished and apprehended Aboriginal children and their subsequent placement in foster and adoptive homes. This period, referred to as the "Sixties Scoop," saw over 11,000 status Aboriginal children adopted into non-Aboriginal homes in Canada and around the world (Timpson, 1995; Johnston, 1983).

By the 1970s, one in three Aboriginal children were separated from their families by adoption or fostering (Fournier & Crey, 1997). That decade was marked by a significant increase in Aboriginal children in care in Canada — 44 per cent in Alberta, 51 per cent in Saskatchewan, and 60 per cent in Manitoba (McKenzie & Hudson, 1985, p. 126). Currently, child-in-care statistics are even more problematic; an estimated 80 per cent of the children and youth in out-of-home care in the province of Saskatchewan at the end of the 2008/09 fiscal year were Aboriginal (Sask., 2010). The statistics are comparable to both British Columbia and Manitoba, both of which have high Aboriginal populations, and both of which were the most intensely affected by the child welfare system (Sinclair, 2007b). Gough et al. (2005) observed that assimilation policies led to higher incidents of child removal and the overrepresentation of Aboriginal children in care, because Aboriginal children were relinquished and apprehended at twice the rate of non-Aboriginal children, primarily owing to socioeconomic conditions, alcohol abuse, neglect, criminal activity, and cognitive impairment (p. 2).

Non-Aboriginal Alternative Care

The alternative care system has harmful effects on children generally (Brand & Brinich, 1999) and the current system is primarily populated with Aboriginal youth and children. Despite attempts to recruit Aboriginal foster and adoptive homes, the literature indicates that most Aboriginal children in alternative care are placed in non-Aboriginal homes (Maurice, 2003; Bennet et al., 2005; Sinclair, 2007a). The placement of Aboriginal children into non-Aboriginal contexts is problematic on many fronts: children's bonds and attachment to families and communities is disrupted, children are separated from exposure to language and culture, children are socialized

in non-Aboriginal contexts with concomitant cultural expectations, and children are vulnerable as members of a marginalized and oppressed minority group.

In alternative care contexts, particularly in a racialized milieu, Aboriginal children are extremely vulnerable. In racialized contexts, vulnerability carries with it an added danger of discrimination-based harm, which has been confirmed by narratives of adults who were involved in the child welfare system (Sinclair, 2007a; Stolen Generations, 2003). Children in the child welfare system are in a state of complete vulnerability because of their dependence on assigned caregivers for their wellbeing and survival. They are defenceless and unprotected, first, because their primary parental and family bonds have been damaged, and second, because they are at the mercy of the good will of their substitute family. Bennett et al (2005 citing Proulx and Perrault, 1996) found that children who were removed from their parents were less likely to form strong attachments with others, resulting in less social control and an increased likelihood they will break the law. Multiple placements have the overall effect of reducing opportunities to bond with others, a finding that is increasingly supported by research conducted on inmates in prison (Trevethan et al., 2002; RCAP, 1996; Waldram, 1997).

The level of life risk for Aboriginal children in care is high, and the numbers of children who have died in care indicates that they are extremely vulnerable to harm (Cradock, 2007). In Saskatchewan alone there were 64 deaths of children in care in 2000 and 2001. Fifty-six of those children were Aboriginal (First Nation, Métis, Non-status, and Aboriginal status unknown) (SCA 2005). The Canadian Incidence Study of Reported Child Abuse and Neglect (2001) confirms that being a child-in-care is a significant risk factor for harm:

> What is known is that all Canadian children who receive child protection services have been deemed at significant risk of, or are actual victims of child abuse, neglect and maltreatment. (Trocme et al., 2001)

Aboriginal Child Welfare as a Pathway to Gang Involvement

Aboriginal child welfare as a factor implicated in gang involvement and criminality is quite firmly established in the literature. A study conducted in 2001 noted that 60 per cent of Aboriginal inmates in federal penitentiaries are products of the foster care or adoption system in Canada (Trevethan et al., 2002). Similarly, 60 per cent of homeless Aboriginal youth in three of Canada's largest cities (Vancouver, Toronto, and Montreal) who participated in a research study in 1995 came out of the foster care and adoption systems (Gilchrist, 1995), and Toronto Native Child and Family Services reported regular requests for help from homeless, former foster/adoptee youth, particularly in the two decades preceding the report (Stevenato, 1999).

Looking deeper, the path from child welfare to gang involvement is exacerbated through the dislocation of Aboriginal children that manifests in trust and attachment problems, as well as an array of mental health issues. Attachment disordered children suffer a range of behavioural, emotional, and mental health problems connected to earlier upsets and losses, and these effects can carry into adulthood, affecting behaviour and interpersonal relationships over a lifetime (Bowlby ,1973; Brandon et al., 1999). Golding (2003) found that attachment is shown to be a predictor of social, cognitive, behavioural, and academic performance, and in an Aboriginal context, these attachment issues may be even more complex than standard attachment theory implies. Conventional attachment theory is grounded in a nuclear family context (Neckoway et al., 2007), and can be criticized for overlooking cultural socio-political aspects of Aboriginal

family and community systems that may be important in the lives of Aboriginal children whose families of origin, since time immemorial, include much larger networks of relatives than Euro-Canadian families.

Vulnerability, abuse and harm, and attachment problems in youth create susceptibility to juvenile delinquency, disenfranchisement, and gang recruitment. Gang members themselves state that their peers who have been raised in care make good targets for recruitment because gangs promise to act as family substitutes (Grekul & LaBoucane-Benson, 2008). In the words of a former gang member,

The kinds of kids that are attractive to gangs are street kids without close family. These kids want love and respect and the gang provided that for them. Kids within the family services system are really attractive to gangs. (p. 68)

Interrelated Factors that contribute to Gang Involvement

Vulnerability to gang involvement occurs in a several more interrelated ways. Intergenerational dysfunction in families of origin may lead to gang involvement, and where family members are gang-involved they may also be a source of recruitment (Grekul & LaBoucane-Benson, 2008). Thirty per cent of gang members in one study reported unsafe and unsupportive parenting practices that included families of origin as well as foster homes. One participant stated: "I learned violence from foster homes, those disciplinarians . . . that's how I learned to be adapted to anybody" (Goodwill 2009). In some instances the search for identity, peer support, and belonging are sparked by out-of home care and/or family dysfunctions (Grekul & LaBoucane-Benson, 2008).

Mental health problems may also lead to gang involvement because the mental wellbeing of families is either an insulating or a risk factor for youth issues later on (McCormick, 1994; Chandler & Lalonde, 1998). A 1995 study by two Aboriginal psychologists in Oakland, California found that 75 per cent of Aboriginal people attending their clinic, even if their presenting symptoms were not described in terms of Post Traumatic Stress Disorder (PTSD), were suffering effects that met the clinical diagnosis for PTSD (Duran & Duran, 1995). Similarly, Kirmeyer, Tait, and Brass (2000) articulate the connections between colonization, colonialism, and the current rates of mental health problems among Aboriginal people. Among youth, distress is readily assessed through suicide rates, which are between five per cent and 20 per cent higher than in non-Aboriginal youth, although Aboriginal communities vary greatly in their suicide rates (Chandler & Lalonde, 1998). Interrelated factors such as educational and employment inequities and marginalization of aboriginal youth (Grekul & Laboucane-Benson, 2007a) contribute to high frustration levels; a perception of lower socio-economic potentiality, as well as reduced self-esteem and assorted psychological and emotional comorbidities.

Many young people feel they will never succeed in school or get a good job and they quite often experience boredom and a feeling of not being able to face the future. (Bennett et al., p. 43 citing Minore, Boone, Katt & Kinch, 1991).

The interrelated factors span micro (individual), mezzo (community), and macro (policy/society) levels and support the hypothesis that family and community social and emotional bonds and attachment, which ordinarily play a significant role in socialization and social control, are more tenuous in the fragility of the Aboriginal post-Residential School context (Grekul & Laboucan-Benson, 2007, p. 30). In sum, the factors that are implicated in gang involvement

become clearer when viewed through a critical structural and structural lens. Evidence of the scope of the Aboriginal youth gang problem, however, is not readily available, and so the attention in this article now turns to critiquing the existing data and deconstructing the prevailing discourse about Aboriginal youth gangs in order to arrive at a better understanding of the scope and substance of the issue.

The Scope of the Gang Problem

The academic literature on gang issues in Canada is sparse, and the literature on Aboriginal youth gangs is even more limited. There are a number of federally funded projects and a smattering of academic articles, as well as several Master's and PhD theses on gangs or gang-related topics. Hence, the collection of gang literature is small, relatively homogenous, limited in scope, and, in regard to statistics and themes, occasionally redundant. In other words, much of the information related to Aboriginal youth gangs in Canada can be gleaned from any one or two reports of the past decade. Grekul and LaBoucane-Benson (2008) note that the lack of research on Aboriginal youth gangs is a "glaring omission" in the gang literature (p. 61).

The most significant weakness in the literature is the problematic statistics upon which the Aboriginal gang "crisis" in Canada is premised. Here we see a phenomenon where reports, whether accurate or not, are reified over time through repetitive citing by subsequent authors who, for reasons unknown, neither critique nor confirm the veracity of the source material. No less than eight of the most prominent reports on Aboriginal gangs in the past decade cite one single source for Aboriginal gang statistics: a report titled, Results of the 2002 Canadian Police Survey (CPS) of Youth Gangs by Astwood Strategy Corporation.

Astwood Corporation was contracted to survey police jurisdictions and gather data on Aboriginal youth gang activities in as many regional jurisdictions as possible. The report is comprehensive, with solid methods, a sound sample size, and excellent response rates from police jurisdictions; however, what is problematic, and acknowledged as a limitation in the report, is that the numbers of gang members are based on stratified estimates. Only some of the jurisdictions reported estimates for gang numbers and member numbers, so for those that did not, the author stratified the data into "appropriate populations groups, and an average number of gangs and gang members were calculated for each group" (2002, 7).1 Although this is an appropriate approach, statistically speaking, population numbers are not included, so the accuracy of the estimates cannot be critiqued or verified. Given Canada's diverse population distributions, especially in relation to its geography, the data is important to assess accurately. For example, we cannot assume that a stratified ratio applied to a large urban centre such as Toronto could be appropriately applied to northern Ontario or the western provinces.

In sum, the Canadian Police Survey is based on qualitative information and must be used with caution because it is essentially an exploration of police perceptions of gang activity, with contrived numbers based on a perceived problem. In the intervening years since its publication, however, constant referencing of those hypothetical numbers by subsequent Canadian reports on Aboriginal Youth Gangs have effectively reified the statistics — that is, many authors have quoted the statistics as factual without assessing their qualitative limitations. A survey of reports citing the CPS 2002 stratified estimates include:

[1] The CPS 2002 does not provide the stratified population data or population/gang ratio data.

- Bania (2009). Gang violence among youth and young adults.
- Criminal Intelligence Service Saskatchewan (2005). Aboriginal-based gangs in Saskatchewan
- Preston, Carr-Stewart, and Northwest (2009). Aboriginal Youth Gangs: Preventative Approaches.
- Totten (2008, 2009a and 2009b). Totten (2009) cites Totten (2008), which references the CPS report.
- Chettleburgh (2007). Young Thugs.
- Criminal Intelligence Service Saskatchewan (2005).
- Public Safety Canada (2005, 2007, 2010).
- Mellor et al. (2005). Youth Gangs in Canada: A preliminary Review of programs and services.
- Public Safety and Emergency Preparedness Canada. Submitted by the Canadian Research Institute for Law and the Family. September (2005)

Examined in their totality, the statistics are problematic and occasionally contradictory. Synthesizing them does not provide an accurate picture of gang numbers generally, or Aboriginal numbers specifically. Table 1 below shows the numbers represented in the Canadian Police Survey and the Criminal Intelligence Service Canada (2006) report.

Table 1: Aboriginal Youth Gang Statistics

Report	# of Gangs	Total Members	Report	# of Gangs	Total Members
CPS 2002	434	7071	CISC 2006	300	11000
	None	Yukon,NWT, Nunavut PEI, Nfld/Labrador		None	Yukon, NWT, Nunavut PEI, Nfld/Labrador
	102	BC – 1027		20	BC
	42	Alberta – 668		30	Alberta
	28	Saskatchewan – 1315		21	Saskatchewan
	15	Manitoba – 171		25	Manitoba
	216	3320		80	Ontario
				*95	GTAincluding Thunder Bay, Niagara Falls, Ottawa
	25	Quebec - 533		50	Quebec
	6	Nova Scotia - 37		10	Nova Scotia
	0	New Brunswick		7	New Brunswick

CPS – Canadian Police Survey, Astwood Strategy Corporation, M. Chettleburgh

CISC – Criminal Intelligence Service of Canada

A retrospective glance at a 1998 report by Soullière for the Canadian Police College — Report on Youth and Gangs — identified 335 youth gangs, 105 of which were involved in criminal activities between 1991 and 1992. Soullière admitted, however, that the numbers were unknown, and that estimates were made from consulting with police. Assuming that statistics as reported by police are accurate, and by comparing those numbers to the above, we would infer that in the four-year period between 2002 and 2006, the number of gangs in Canada dwindled by 33 per year while membership numbers increased by 1,000 each year. Such an increased concentration of members in fewer gangs would likely not go unnoticed or unreported, but that data is not reflected in other sources at this time.

Table 2: Comparison data

Report	Numbers
Metro Toronto Police – 1992	335 gangs (Toronto only)
Canadian Police Survey - 2002	434 gangs, 7071 members
Criminal Intelligence Service Canada -2006	300 (175 in GTA, Thunder Bay, Niagara and Ottawa), 11,000 members

It could be assumed that large increases or decreases in gang numbers would be noticed by police services as well as the general population, and reported in the media. However, subsequent Criminal Intelligence Service Canada (CISC) reports for the years 2007 to 2009, inclusive, omitted any reference to gangs. In 2010, the only CISC mention of gang activity was limited to the following comment regarding the size of the threat: "Since 2006 there has been an increase in the number of street gangs identified by law enforcement agencies across Canada" (18). An "increase" is not quantifiable and does not help provide statistical clarity.

In a 2007 publication Chettleburgh breaks down the statistics based on the data in the CPS 2002 survey. In the latter report he notes that Saskatchewan had 28 gangs and 1,315 members (14), while the book indicates that Saskatoon only had 11 gangs and 580 members, and Regina had 1 gang with 275 members. This could be a surprising but logical decrease inferred from the CPS if the data were based on actual numbers, but the more detailed statistics are still drawn from the same hypothetical estimates. Further, the latter statistics would surprise any Regina resident. Surely one gang with so many members would be noticeable to the public, given the familiar signs and symbols of gang affiliation in Saskatchewan, such as specifically coloured "rags" (bandanas) worn by members. How the Saskatchewan numbers were calculated is not provided. Even more interesting is the projection that Saskatoon is apparently a hotbed of gang activity with a per capita gang rate of 2.57 and Regina at 1.42 — the two highest rates in the country (p. 22).

In contrast to these numbers, the Criminal Intelligence Service of Saskatchewan in 2005 stated that all of Saskatchewan has 12 gangs (CISS 2005); a local gang exit project coordinator recently confirmed this statistic independently. At the street level in Saskatoon, Aboriginal consensus would most likely be that gangs are more of a problem in Manitoba, and in Winnipeg specifically. This is validated by Goodwill (2009) citing Sheremeta (1999), who noted that "Winnipeg Police department authorities reported 1400-1500 active gang members in the city, 75 per cent of whom were of Aboriginal descent" (p. 2). Those numbers are 700 per cent higher than Chettleburgh's

estimates for Winnipeg (including all of Manitoba), and the gang numbers for Saskatchewan as indicated in the CISS are about 60 per cent fewer than Chettleburgh's estimate.

The notion that Saskatchewan is the epicenter for gang activity is not supported by other reporting. Constable C. Campbell-Waugh, in a 2008 panel discussion in the RCMP Gazette (2008), noted that the Canadian Centre for Justice Statistics had completed a study titled "Criminal Victimization in Canada."

The study revealed that among 17 Canadian cities surveyed, Halifax had the highest violent crime rate, with 229 violent incidents for every 1,000 people over age 15. Youth gangs, with their involvement in violent street-level robberies, assaults, and weapons offences, were a major contributing factor.

Given the overall fragility of the existing statistics, the label of "epidemic" (Preston, 2009; Totten, 2009a; Totten, 2009b), often used to describe the gang situation, can justifiably be challenged, at least until more robust statistics can be gathered. Until such time as more accurate data collection strategies emerge, the scope of the Aboriginal Youth Gang problem must be reported with caution. Indeed, much of the information reported in the past five years is redundant. Even more problematic is the fact that the limited scope and robustness of the research calls into question the veracity of the data currently taken to represent the issue of Aboriginal youth gangs. The most recent publication on gangs in Canada by Mark Totten validates the lack of accurate statistics and calls for research to identify the scope of the problem (Totten, 2012).

Social Construction of Aboriginal Youth Gangs

An Aboriginal youth gang discourse premised upon questionable statistics and frequent speculation about high numbers serves to invoke fear. The fear, in turn, fuels recrimination through discrimination and racism levied against Aboriginal youth, and a tendency toward hypervigilance about Aboriginal youth behaviour that, in turn, leads to increased racial profiling and criminalization of Aboriginal youth (Mercredi, 2000; FSIN, 2003). Aboriginal youth experience an elevated and pervasive level of oppression from the general public and, more worrisome, from law enforcement, because they are targets of an extremely negative and charged perception (Mercredi, 2000: Grekul & LaBoucane-Benson, 2008). Ironically, the negative discourse ultimately leads to increased gang involvement because, once incarcerated, Aboriginal youth are often forced to join gangs or affiliate with gangs in order to acquire protection and safety (CISS, 2005; Chettleburgh, 2007; FSIN, 2003; Goodwill, 2009; Mercredi, 2000; Totten, 2009a; 2009b). A former gang member in Grekul and LaBoucane-Benson's study (2008) reported that

> The majority [of individuals recruited in prison] stay [with the gang] when they leave prison because sooner or later they will be back in prison and will need protection and support. (p. 72)

Indeed, a Saskatoon gang exit program coordinator describes the Saskatchewan correction system as "a recruiting ground" for Aboriginal gangs (Tu'Inukuafe 2011, personal communication) while a 2000 study described correctional centres as "training grounds" for gangs (Mercredi). Another study noted that some Aboriginal youth gangs in Canada "actually credit prison processes with their birth and creation" (Grekul & Laboucan-Benson, 2007, p. 21). Institutional gang activity then interfaces with street level youth when they enter prison or once hardened

individuals are released from institutions. According to Gordon (2000), these individuals will negatively influence youth gangs in terms of trafficking, violence, and access to weapons.

The evidence shows that Aboriginal youth gangs do exist and in some contexts are highly problematic. In western cities, it is rare that a week goes by without news reports of violent gang activity. However, gangs exist on a continuum from loosely knit groups of friends/relatives who may coalesce for protection and camaraderie and also engage in opportunistic petty crime together (Gordon, 2000), to hardened adult gang members in organized hierarchies with strong connections to some of the most notorious gangs in the world, including the Hell's Angels (Tu'Inukuafe 2011, personal communication; Chettleburgh, 2007; FSIN, 2003; Mercredi, 2000). Unfortunately, given the lack of research, the real scope of the issue is unknown. The public relies on sporadic media reports for their understanding of the issues, and those are often sensationalized because the reports are about extreme violence and crime. Often reports are about gang activity in the United States or in large Canadian centres like Vancouver, Toronto, and more recently, Montreal (Soulliere, 1998; Libin, 2010; Erickson, LaBoucane-Benson & Grekul, 2007; Totten, 2008).

Interestingly, in many news reports, the ethnic make-up of gangs is not Aboriginal. However, it appears that some Aboriginal youth and especially those who come into contact with the justice system are assumed to be gang affiliated whether they actually are or not. These youth are faced with two powerful labels: "Aboriginal first and through stereotyping, gang members" (Grekul & LaBoucane-Benson, 2008, p. 72). With these labels come a number of assumptions and behaviours that serve to further stigmatize and marginalize Aboriginal youth. Labels are powerful social constructions with potentially harmful consequences.

To be certain, gang crime and violence are a serious matter and a cause for concern. But the literature and, more importantly, the mass media, appear to inequitably and inappropriately focus on Aboriginal youth gangs as the most problematic. Media reporting, intentionally or not, seems to highlight Aboriginal youth gangs, regardless of whether they are actually the crux of the problem. For example, Jordana Huber (National Post, April 13, 2008), reporting on a rash of shootings in Toronto, Vancouver, and Surrey, BC, the epicenters for Black and Asian gangs, highlighted a Winnipeg "gang-style" shooting and mentioned a notorious Aboriginal gang, the Indian Posse. The fact that the article was actually about non-Aboriginal gangs was subsumed; readers were directed instead to see and retain the highlighted points about "youth gangs," "rash of shootings," and "Indian Posse," when a more salient point would have been the 14 gang-related homicides in Vancouver in the three-month period prior to the article, and several shootings in Surrey — none of which involved Aboriginal youth or adults! Focusing on and providing details about a single incident in Winnipeg worked to solidify a perception in the public mind that the "gang epidemic" is about Aboriginal people. An article by Kevin Libin of the National Post, in February 2008, reported on Aboriginal gangs:

> If you go into North Winnipeg and you talk to the Aboriginal community and you ask them a question, "How many of the boys in your community, under 18, are gang-involved?" most often I get the answer, "All of them," says Michael Chettleburgh, author of Young Thugs: Inside the Dangerous World of Canadian Street Gangs. "If you went up to Edmonton or you go up to the Hobbema Reserve, you will see in those communities a level of poverty like I see down in some big cities in the United States. If you are a young Aboriginal male, growing up in that community where there is a persistent and an ambient sense of danger all the time, where there are ample drugs, where there are other gang-affiliated kids, when the economic prospects are

> marginal. . . . "People will ask me, 'Why are kids joining gangs?' I say to them, 'Why aren't they joining gangs?'"

While it is true that the north end of Winnipeg has pockets of intense gang involvement, among other social pathologies, the danger is that the average reader may not discern that these are only pockets; they may instead apply that image to all Aboriginal people, perpetuating fear about Aboriginal gangs. The "mark of the plural" (Freire, 1972) is where the negative or harmful actions of the few are applied to the many. Aboriginal youth are being portrayed, on the whole, as frightening and violent gang predators on the prowl on Canadian streets. Using Hobbema as an example of youth gang violence in Canada is like using one small town as representative of the population in Canada. In the same way that a town population is not representative of the general population, the unique social, economic, and political context of Hobbema should not be applied to the rest of the country.

The written word can wield power and influence in the public mind and just as reporting can incite the public into an uproar over the "gang epidemic," so, too, can reporting quell fears and hysteria. As an example, one author describes Aboriginal youth gangs as an "epidemic of gang violence [with] young Aboriginal gang members . . . killing each other and committing suicide at rates that exceed those of other groups in Canada" (Totten, 2009, abstract). However, in a report to the British Columbia Ministry of Public Safety and Solicitor General the previous year, he had this to say about youth gangs in general:

> There are many myths perpetuated by the media and the general public which contribute to a social panic about youth gangs. In reality, the vast majority of B.C. youth are healthy, contributing members of society; less than 0.5 per cent belong to gangs. It is important to understand that most gangs in Canada are adult, not youth gangs. Further, the large majority of youth who are mistakenly classified as "gang members" are instead involved in anti-social behaviours which, although serious nonetheless, are not gang related. (Totten, 2008, p. 23)

The manner in which gangs are reported on in the media and in academic publications is important because such reports contribute to the overall perception of the problem as well as how Aboriginal youth are perceived in the public eye. It will also provide insights for solutions.

> We need to critically assess how it is that the current construction of youth gang activity has come to dominate at this point in time . . . the role it plays in constructing the problem will certainly have to be part of constructing a solution. (Grekul & LaBoucane-Benson, 2007, p. 23)

One solution is to examine how youth become labeled as gang members. Totten's comment about mistaken classification is highly salient to Aboriginal youth gangs: the point where Aboriginal youth interface with the justice system is often the juncture where they become defined and labeled as gang members.

Gang Definitions, Types, and Labeling

A good selection of literature addresses the problem of how gangs are defined, and Richter-White (RCMP, 2003 citing Venkatesh, 1996) observed:

> Youth congregating in gangs seems to be one of the most misunderstood and negatively interpreted phenomena of youth. Membership in a youth gang does not necessarily guarantee a negative short or long-term outcome for a youth and/or society, or the direct passage into organized criminal groups as many media sources have purported. Instead, gangs often

> provide an immediate wage and/or a direct sense of community and identity for youth whose economic and social opportunities are limited. (p. 17)

According to Gordon (2000), analysts and policy makers should be thinking of gangs along a continuum, ranging from groups of friends who spend time together and occasionally get into trouble, to more serious organized criminal groups or gangs (p. 51). Aboriginal youth gang members themselves report that gang members are not perceived as vastly different from other members of Aboriginal society (Lafontaine et al., 2009), and many Aboriginal youth and young adults in prisons or correctional centres resist and resent being automatically labeled as gang members when they don't see themselves that way (FSIN, 2003; Mercredi, 2000; Grekul & LaBoucane-Benson, 2008).

Several typologies have emerged as researchers and academics grapple with the issue of labeling. These are summarized in Table 3 (p. 20). Mellor and colleagues (2005) conducted a review of youth gang programs and services, and in the course of that review identified five types of gang involvement that were primarily differentiated based on criminal activity (p. 8). Perhaps even more valuable in relation to the often loosely-knit nature of Aboriginal youth gangs is the second typology adapted from Gordon's (2000) article on Vancouver gangs. This typology is important for its application to a street-level analysis of gangs, where the categories are less rigidly defined but inclusive and revealing of the scope of labeling that occurs. This is very much aligned with Tu'Inukuafe's comments that Aboriginal youth, especially teens, have a very fluid membership approach that is often opportunistic and is motivated through family/friend relationships (2011, personal communication).

Mellor et al.'s (2005) typology of gangs identifies five types of involvement determined by the amount of criminal activity that a group displays, recruitment strategies, and the structures that are in place to support the gang (p. 8).

Mellor et al.'s (2005) typology has been widely referenced and applied. Its utility is based on the continuum of criminal involvement, which, in much of the literature that is sponsored by law enforcement, criminal intelligence, or public safety, is what gang concerns are centred on. Gordon's typology is primarily based on the last two categories, with the first two added based on Gordon's descriptions of how youth are labeled by others. The "Street Gangs" category is all-encompassing. The "Wanna-be Gangs" category is important because it encompasses the category of Aboriginal youth who may not actually be gang members but gather together in large groups for belonging, safety, a desire for respect and reputation, and for fun or criminal behaviour. Social exclusion and limited access to opportunities in urban centres may result in more Aboriginal youth clustering together (Dukes et al., 1997).

For Aboriginal Youth who utilize the wanna-be strategy, there is the risk they will be treated like gang members by real gang members as well as the police and the general public. A 13-year old boy was shot and killed because he responded "straight up" when asked if he was a member of the Indian Posse by a youth in a passing vehicle (Grekul & LaBoucane-Benson, 2008). Another youth reported his friend intentionally wearing colours of three different gangs: "And I happen to know that that kid is carrying 3 rags. Why? Because he doesn't want to get his ass kicked, and he is not even gang affiliated at all" (Henry, 2009, p. 58).

Table 3: Gang Typologies

(Mellor et al. 2005, p. 8)	
Type A:	A group of friends who tend to be interest-based (e.g., sports teams, skateboarders) and usually do not engage in criminal activity. They pose no threat to the community and therefore should be encouraged.
Type B:	Spontaneous criminal activity gangs are social in nature and gather their power and status through their numbers. Criminal activity is situationally motivated and can be categorized as gratuitous violence and bullying due to a lack of supervision. These youth usually do not move to the next level because they have other options, either economically or socially outside the gang.
Type C:	Purposive gangs come together for a specific purpose. Whether stealing cars, engaging in vigilante-type violence, or spontaneous mob activity, these gangs can emerge from larger gangs and usually disband once the purpose has been accomplished.
Type D:	Youth street gangs are highly visible hardcore groups that come together primarily for profit-driven criminal activity. These street gangs identify themselves as such through the adoption of a gang name, common brands, styles, clothing, colours, jewellery, and tattoos. These gangs do not seem to be part of a larger criminal organization and often have a territory or turf that they claim and defend as their own.
Type E:	Structured criminal organizations are networks that tend to be led by criminally experienced adults for the purpose of economic or financial gain. The criminal activity of these types of gangs tends to be severe in nature and premeditated. Youth are often used for specific purposes to further the gang's activities. Examples of these types of gangs in Saskatchewan include the Indian Posse, Saskatchewan Warriors, Native Syndicate, and Hells Angels (Mellor et al., 2005, p. vi).
(Adapted from Gordon, 2000)	
Media Constructed Gang	Small groups of offenders referred to as gangs when they do not see themselves that way; media use of inaccurate terms that distort and amplify gang problem. Media imposes a name; e.g. "Back Alley Boys" was given to teen bullies who were robbing their peers in back alleys.
Police Constructed Gang	Similar to media constructed gangs. Police apply a name to a collectivity that is engaged in criminal activity together or engaged in the same criminal activity. For example, the "626 gang" were a group of youth and adults who engaged in a rash of stealing Mazda 626 vehicles. In Saskatoon, the "Oldsmobile gang" label was applied to youth and adults who opportunistically stole Oldsmobile vehicles.
Street Gangs	Groups of young people, mainly adults, who come together and form a semi-structured organization to profit from criminal behaviour and acquire territory. They self-identify as a gang and have identifying marks, colours. They openly identify with some visibility because they want to be seen as gang members by others.
Wanna-be Gangs	Clusters of young people who band together in loosely structured groups to engage in spontaneous social or criminal activity, including peer violence. Highly visible and display gang involvement to be seen by others as gang members. May use clothing, colours, or other identifying marks.

Similarly, Gordon's category of "Media Constructed" gangs explains the labeling by media and police that misrepresents all youth who gather together and break the law as gang members. According to Grekul & LaBoucane-Benson (2008), the label of "gang" is a highly judgemental one and an "overtly negative term applied indiscriminately by adults to groups of adolescents ranging from friends hanging out who occasionally get in trouble, to more serious organized criminal gangs" (citing Mathews, 2005, p. 204). Labeling Aboriginal youth can be especially problematic because of their existing marginalization.

Labeling stereotypes can lump particular individuals into the same category, and this can have a marginalizing effect on youth, which further distances them from the community. Because marginalization inhibits social mobility, mislabeled youth may actually become more likely to engage in a gang lifestyle (Henry, 2009, p. 59).

Labeling is risky because it may also be inaccurate. Phil Fontaine, the former elected leader of the Assembly of First Nations, was erroneously labeled by police as a gang member and had to take legal action to have his name removed from the gang list (Mercredi, 2000). Criteria for consistent application across the country, and even within provinces, are absent in the literature, and the omission of relevant definitions and criteria for identifying Aboriginal youth gang numbers and membership point to a severe limitation in the research and the literature. It challenges the veracity of the conclusions. "National studies can be misleading if communities do not share an understanding of what defines youth gangs, or the criteria used to define a gang" (Henry, 2009, p. 30).

The Connection between Aboriginal Youth, Gangs, and Prison

Aboriginal youth and the prison system are intricately connected, much more so than any other ethnic group. Aboriginal gangs are a relatively new phenomenon; the widespread belief is that Aboriginal gangs established a presence in Saskatchewan through the federal and provincial correctional centres in the mid- to late 1990s. Their numbers seemed to gain momentum following a 1997 riot at Stoney Mountain Penitentiary (CISS, 2005). After the riot, Manitoba gang leaders were moved to secure custody in Saskatchewan institutions where they began recruiting new members: "This redistribution of gang members into other prisons ironically facilitated widespread recruiting, therefore expanding their territory and control" (Henry 2009, p. 16). In prison, Aboriginal youth who are newly sentenced or first-time offenders are particularly likely to join a gang for protection purposes, and released prisoners continue recruitment and gang activity upon release (Mercredi, 2000).

Although the relationship between gangs and prisons is not completely clear, it is certain that a connection exists (Grekul & LaBoucane-Benson, 2007). In some instances, incarcerated Aboriginal youth/adults join gangs in prisons and find respect and recognition they didn't have before. A corrections employee observed that "with Redd Alert — lots of them found recognition in gangs. They hadn't had that before — they were abused, put down all their lives. They got in the gang and had a name. 'I'm somebody.' They got recognition and a sense of belonging" (Grekul & LaBoucane-Benson, 2008, p. 42).

Healthy Aboriginal Youth and Protective Factors

Despite the tremendous obstacles facing Aboriginal youth, an area of literature that has recently received increasing attention addresses resiliency. There is a significant gap in literature

on successes in Aboriginal communities, but some research has highlighted community protective and insulating factors as having significant implications for youth wellness. One study that addressed the mental health of Aboriginal people observed that incorporating cultural concepts, including interconnectedness and spirituality, into counselling tapped into the need for reconnection. Likewise, incorporating ceremony and principles of empowerment, cleansing, balance, discipline, and belonging into healing practices facilitated effective and relevant Indigenous healing processes for participants (McCormick, 2000).

At the community and structural levels of intervention, Chandler and Lalonde (1998) identified a cultural continuity model that enhanced community wellness as well as individual agency and efficacy in community members. The authors confirm earlier research by Minore et al (1991; cited in Bennett et al., 2005) that community control of health, education, police and fire services, cultural activities, self-government, and land claims all combined to reduce suicide levels (cited in Goodwill, 2009).

When communities succeed in promoting their cultural heritage and in securing control of their own collective future — in claiming ownership over their past and future — the positive effects reverberate across many measures of youth health and well-being. Suicide rates fall, fewer children are taken into care, school completion rates rise, and rates of intentional and unintentional injury decrease (Lalonde, 2005, p. 23).

We can extrapolate that efforts to augment personal and community efficacy and agency lead to positive mental and social health outcomes. Lalonde's work informs us that resilience in Aboriginal youth is intricately connected with culture and control in Aboriginal communities, and validates the finding that culturally based intervention programs are the ones proving to be most effective with Aboriginal gang members. One example is the Str8 Up program out of Saskatoon.

The Str8 Up program was started for individuals wanting to escape gang life, and it stands among the most comprehensive gang exit programs currently operating. Based on an American program, it was adapted for a Canadian/Saskatchewan context and may provide a model for development. It is unique in that participants self-identify and self-select. It is not supported by core funding; its 50 members raise all operating funds through speaking engagements, and program information is disseminated by word of mouth. There is no age limit, but participants are generally over 18.

The program has three goals for participants: to be responsible citizens, to be faithful partners, and to be loving parents. In addition, there are five conditions each participant must be willing to adhere to:

- Drop their gang colours
- Deal with their addiction
- Be honest (drop "attitude" and manipulative ways)
- Be humble
- Be willing to give the program a chance by accepting support and committing to partake for 4 years (John Howard Society).

Program activities include visiting peers in the correctional facility and holding meetings there; and presenting in schools, reserves, addiction centres, and any organization that expresses a need or interest. The group meets once a week and participants learn about healthy lifestyles

and positively contributing to and partaking in community. They enjoy recreational activities and have barbecues. The program offers strong leadership modeling as well as social support with housing, employment, and general community errands (Tu'Inukuafe 2011, personal communication).

Until evaluation research can confirm what we suspect, it appears that the success of best practices programs is rooted in their holistic approach, based on an Indigenous/holistic framework and the pragmatic approach to changing behaviours. There is a lot of research to be done in the area of Aboriginal youth gangs and it should be conducted by Aboriginal researchers with life, cultural, and worldview experiences similar to Aboriginal youth gang members. Goodwill (2009) notes that the existing chasm in the literature needs to be filled by community member perspectives. "It is important in understanding Aboriginal gang issues from community members' perspectives because they have their fingers on the pulse of the problem as they live with the effects of gangs in their communities on a daily basis" (p. 34-35).

Conclusion

Many of the factors that lead to Aboriginal youth gang involvement are linked to the colonial history of Canada and include intergenerational trauma, family and community breakdown, and Aboriginal child welfare involvement. Gang involvement is invariably connected to alternative care, which is implicated as a source for problematic intrapersonal and mental health issues, including attachment and bonding, criminality, homelessness, suicide, and general social exclusion. Compounding the structural issues, a critical analysis informs us that contemporary issues of discrimination and oppression also play out in the social construction of Aboriginal youth and youth gangs as problematic. What the research and the analysis clearly reveal is that Aboriginal youth gang involvement is the outcome of a complex system of social distress, and the juxtaposition of multiple risk factors facing Aboriginal people in Canada.

This article synthesized the available gang statistics in order to observe the limitations, contradictions, and gaps in the data, which, by their omission, provide sound direction for future research. In summary, although Aboriginal youth gangs exist and in some contexts are highly problematic, the data lacks robustness and is statistically unreliable because most of the statistics reported are based on one report that provided hypothetical estimations for gang membership numbers in 2002. Additional data from police organizational reports is often not referenced to an original source, so its veracity cannot be verified without much more detailed and time-intensive research. The limitations of the statistics exacerbate concerns around the definition of gangs in Canada, especially Aboriginal youth gangs. At the point where gang members can be tallied — the justice system — any existing definitional guidelines may or may not accurately reflect gang membership; definitions that describe gangs as "individuals who commit crimes together" are extremely limited and untrustworthy. Youth gang statistics need more robust quantitative research that can accurately inform researchers, theorists, and the public, and thereby prevent inaccurate information from being drawn upon by media and perpetuated by academics and researchers.

Issues surrounding definitions and typologies reveal that attention must be paid to the social construction of gangs in Canada, and how that discourse fuels social and legal relations among Aboriginal youth, and by implication their families and communities, the justice system, and society in general. Analysis of the youth gang reporting in both academic literature and the news media reveals that the discourse is often highly charged; this only serves to further marginalize

Aboriginal youth, compounding their social distress and enhancing the systemic barriers that lead to gang involvement in the first place.

Prevention and intervention programs that focus on Aboriginal youth are limited in number, but several promising programs exist that are premised upon cultural appropriateness and relevance, and these appear to be relatively successful in helping youth to exit gangs. Ultimately, funding for programs and support for research into best practices with Aboriginal youth gangs will go a long way toward providing a more complete picture of the scope of the gang problem and determining which interventions are most effective.

References

Adelson, N. (2005). The Embodiment of Inequity: Health Disparities in Aboriginal Canada. In *The Canadian Journal of Public Health*, 96 (Suppl.2), S45-S61.

Armitage, A. (1995). *Comparing the Policy of Aboriginal Assimilation: Australia, Canada and New Zealand.* Vancouver, BC: The University of British Columbia Press.

Bania, M. (2009). *Gang Violence Among Youth and Young Adults: (Dis)Affiliation and the Potential for Prevention.* In IPC Review, 3, 89-116. http://www.sciencessociales.uottawa.ca/ipc/eng/documents/IPCR3Bania.pdf

Bennett, M., C. Blackstock, & R. De la Ronde. (2005). *A Literature Review and Annotated Bibliography on Aspects of Aboriginal Child Welfare in Canada. 2nd ed.* Ottawa, ON: First Nations Child and Family Caring Society. http://www.fncfcs.com/docs/AboriginalCWLitReview2ndEd.pdf

Bowlby J. (1973). *Attachment and Loss. Volume II: Separation, Anxiety and Anger.* London: Hogarth Press.

Brand, A. E. & P. M. Brinich. (1999). Behavior Problems and Mental Health Contacts in Adopted, Foster and Non-Adopted Children. In J*ournal of Child Psychology and Psychiatry*, 40(8), 1221-1229.

Brandon, M., M. Ower, & J. Black. (1999). *Learning How to Make Children Safe: An Analysis for the Welsh Office of Serious Child Abuse Cases in Wales*. Norwich: University of East Anglia.

Brizinski, P. (1993). *Knots in a String: An Introduction to Native Studies in Canada.* Saskatoon, SK: University of Saskatchewan Extension Press.

Canadian Institutes of Health Research (CIHR). (2007). *CIHR Guideline for Health Research Involving Aboriginal People.* Ottawa, ON: Canadian Institutes of Health Research.

Chandler, M. J. & C. Lalonde. (1998). Cultural Continuity as a Hedge Against Suicide in Canada's First Nations. In *Transcultural Psychiatry*, 35, 191-219.

Chettleburgh, M. C. (2002). *Results of the Canadian Police Survey on Youth Gangs*. Toronto, ON: Astwood Strategy Cooperation.

Chettleburgh, M. (2007). *Young Thugs: Inside the Dangerous World of Canadian Street Gangs*. Toronto, ON: Harper Collins.

Chrisjohn, R. & S. Young. (2006). *The Circle Game: Shadows and Substance in the Indian Residential School Experience in Canada*. Penticton, BC: Theytus Books.

Cradock, G. (2007). The Politics of Kith and Kin: Observations on the British Columbia Government's Reaction to the Death of Sherri Charley. In *First Peoples Child and Family Review*, Vol. 3(1), 15-33.

Criminal Intelligence Service Saskatchewan. (2005, 2010). *Intelligence Trends: Aboriginal-Based Gangs in Saskatchewan*. Regina, SK: CISS.

Dukes, R. L., R. O. Martinez, & J. A. Stein. (1997). Precursors and Consequences of Membership in Youth Gangs. In *Youth and Society*, 29(2), 139-165.

Duran, E. & B. Duran. (1995). *Native American Postcolonial Psychology*. Albany, NY: State University of New York Press.

Duran, B, E. Duran, & M. Yellowhorse Brave Heart. (1998). Native Americans and Trauma of History. In *Studying Native America: Problems and Prospects*, R. Thornton, (Ed.). Madison: University of Wisconsin Press. 60-76.

Erickson, K., P. LaBoucane-Benson, & J. Grekul. (2007). The Community Solution to Gang Violence: A Collaborative Community Process and Evaluation Framework. In *Aboriginal Peoples Collection*. Ottawa: Aboriginal Corrections Policy Unit, Public Safety Canada.

Federation of Saskatchewan Indian Nations. (2003). *Alter-natives to Non-Violence Report: Aboriginal Youth Gangs Exploration: A Community Development Report*. Saskatoon, SK: Federation of Saskatchewan Indian Nations.

Fournier, S. & E. Crey. (1997). *Stolen from Our Embrace: The Abduction of First Nations Children and the Restoration of Aboriginal Communities*. Vancouver, BC: Douglas & MacIntyre.

Freire, P. (1972). *Pedagogy of the Oppressed*. New York: Herder & Herder.

Frideres, J. S. (1988). *Native Peoples in Canada: Contemporary Conflicts. 4th ed*. Scarborough: Prentice Hall.

Gilchrist, L. (1995). *Kapitipis e-pimohteyahk: Aboriginal Street Youth in Vancouver, Winnipeg and Montreal*. PhD diss., University of British Columbia.

Golding, K. (2003). Helping Foster Carers, Helping Children: Using Attachment Theory to Guide Practice. In *Adoption & Fostering Journal*, 27(2), 64–73.

Goodwill, A. (2009). *In and Out of Aboriginal Gang Life: Perspectives of Aboriginal Ex-Gang Members*. University of British Columbia. Doctoral Dissertation. June 2009.

Gordon, R. (2000). Criminal Business Organizations, Street Gangs and "Wanna-Be" Groups: A Vancouver Perspective. In *Canadian Journal of Criminology*, 42(1), 39–60.

Gough, P., N. Trocmé, I. Brown, D. Knoke, & C. Blackstock. (2005). *Pathways to Overrepresentation of Aboriginal Children in Care*. (CECW Information Sheet #23E). Toronto, ON: University of Toronto.

Grekul, J. & P. LaBoucane-Benson. (2007). An Investigation into the Formation and Recruitment Processes of Aboriginal Gangs in Canada. In *Aboriginal Peoples Collection*. Ottawa: Aboriginal Corrections Policy Unit, Public Safety Canada.

Grekul, J. & P. LaBoucane-Benson. (2008). Aboriginal Gangs and Their (Dis)placement: Contextualizing Recruitment, Membership and Status. In *Canadian Journal of Criminology and Criminal Justice*, 50(1), 59-82.

Henry, R. (2009). *Just Another Thug: The Implications of Defining Youth Gangs in a Prairie City*. MA thesis, University of Saskatchewan.

Huber, J. (2008). Rash of Shootings Linked to Youth Flocking to Gangs. *National Post*. Available at http://www.nationalpost.com/news/Rash+shootings+linked+youth+flocking+gangs/443400/story.html

John Howard Society. *Saskatoon. Str8 Up program description*. Available at: http://www.sk.johnhoward.ca/services/saskatoon/#str8

Johnston, Patrick. (1983). *Native Children and the Child Welfare System*. Canadian Council on Social Development. Toronto: Lorimer.

Kirmeyer, L., C. Tait, & G. Brass. (2000). The Mental Health of Aboriginal Peoples: Transformations of Identity and Community. In *Canadian Journal of Psychiatry*, 45, 607-616.

Kellner, D. (1989). *Critical Theory, Marxism, and Modernity.* Baltimore: Johns Hopkins University Press.

Krinsky, M.A. (2010). Disrupting the Pathway from Foster Care to the Justice System — A Former Prosecutor's Perspectives on Reform. In *Family Court Review*, 48(2), 322-327.

Lafontaine, T., S. Acoose, & B. Schissel. (2009). Healing Connections: Rising About the Gang. In *Journal of Gang Research*, 16(2), 27-55.

Leonard, S. (1990). *Critical Theory in Political Practice*. Princeton, NJ: Princeton University Press.

Levitt, K. L. & B. Wharf. (1985). *The Challenge of Child Welfare*. Vancouver, BC: University of British Columbia Press.

Libin, K. (2010). *Real Warriors Hold Jobs.* National Post. February 20, 2008.

Matthews, F. (2005). Youth Gangs. In Winterdyk, J. (Ed.). *Issues and Perspectives on Youth Offenders in Canada* (3rd ed.). Toronto: Thomson Nelson.

Maurice, J. (2003). *De-Spiriting Aboriginal Children: Western Constructions and Destructions of Aboriginal Children in the Child Welfare System During the 1960s and 70s*. PhD Dissertation. University of Toronto.

McCormick, R. (2000). Aboriginal traditions in the treatment of substance abuse: Let only the good spirits guide you. *Canadian Journal of Counselling*, 34(1), 25-32.

Mckenzie, B. & P. Hudson. (1985). Native Children, Child Welfare and Colonization of Native People. In *The Challenge of Child Welfare*, B. Wharf & K. Levitt (Eds.), 125-141. Vancouver, BC: University of British Columbia Press.

Mellor, B., L. MacRae, M. Pauls, & J.P. Hornick. (2005). *Youth Gangs in Canada: A Preliminary Review of Programs and Services*. Ottawa: Public Safety and Emergency Preparedness Canada.

Mercredi, O. (2000). *Aboriginal Gangs: A Report to the Correctional Service of Canada on Aboriginal Youth Gang Members in the Federal Corrections System*. Ottawa: Aboriginal Issues Branch, Correctional Service of Canada.

Miller, J. (1996). *Shingwauk's Vision: A History of the Native Residential Schools*. Toronto: University of Toronto Press.

Milloy, J. (1999). *A National Crime: The Canadian Government and the Residential School System, 1879 to 1986*. Winnipeg: University of Manitoba Press.

Minore, B., Boone, M., Katt, M., & Kinch, P. (1991). Looking In, Looking Out: Coping with Adolescent Suicide in the Cree and Ojibway Communities of Northern Ontario. The *Canadian Journal of Native Studies*, 11, 1-24.

Mullaly, B. (1997). *Structural Social Work: Ideology, Theory, and Practice*, 2nd ed. Toronto: Oxford University Press.

Neckoway, R., K. Brownlee, L. W. Jourdain, & L. Miller. (2003). Rethinking the Role of Attachment Theory in Child Welfare Practice with Aboriginal People. In *Canadian Social Work Review*, 20(1), 105-119.

Neu, D. & R. Therrien. (2003). *Accounting for Genocide: Canada's Bureaucratic Assault on Aboriginal Peoples*. Halifax, NS: Fernwood.

Preston, J. P., S. Carr-Stewart, & C. Northwest. (2009). Aboriginal Youth Gangs: Preventative Approaches. In F*irst Peoples Child and Family Review*, 4(2), 152-160.

Proulx, J. & Perreault, S. (1996). *An Evaluation of the Ma Mawi Chi Itata Centre's Family Violence Program, Stony Mountain Project*. Winnipeg: Ma Mawi Wi Chi Itata Centre.

Public Safety Canada. (2010). *Eastside Aboriginal Space for Youth (EASY)*. Vancouver, BC: Public Safety Canada.

Public Safety Canada. (2007). *Youth Gangs in Canada: What Do You Know?* Ottawa: National Crime Prevention Centre, Public Safety Canada. http://www.publicsafety.gc.ca/prg/cp/bldngevd/2007-yg-1-eng.aspx.

RCMP Gazette. (2008). *Panel Discussion*. Vol. 70(2). Archived at http://www.rcmp-grc.gc.ca/gazette/vol70n2/panel-eng.htm

Reading, J. (2010). *The Crisis of Chronic Disease Among Aboriginal Peoples: A Challenge for Public Health, Population Health, and Social Policy*. Victoria, BC: Centre for Aboriginal Health Research.

Richter-White, H. (2003). *The Direct and Indirect Impacts of Organized Crime on Youth, as Offenders and Victims*. Ottawa: RCMP. March 2003.

Royal Commission on Aboriginal Peoples. (1996). *People to People, Nation to Nation: Highlights from the Report of the Royal Commission on Aboriginal Peoples*. Ottawa: The Commission. http://www.inac.gc.ca/rcap/report/index.html

Saskatchewan Child Welfare Review Panel Report. (2010). *For the Good of Our Children and Youth: A New Vision, a New Direction*. Available at: http://saskchildwelfarereview.ca/CWR-panel-report.pdf

Saskatchewan Children's Advocate. (2005). *A Summary of Child Death Reviews 2000 and 2001*. Available at: http://www.saskcao.ca/sites/default/files//pdfs/reports/caocdrsummaryreportIII.pdf

Sheremeta, D. (1999, March 1). Big Bear meets Al Capone: Winnipeg's feared Native gangs bring their volatile mix of organized crime and Indian radicalism to wildrose country. *Alberta Report* (Online Newsmagazine). Available at http://albertareport.com/volume26/990301/story1.html

Sinclair, J. M., D. Phillips, & N. Bala. (1991). Aboriginal Child Welfare in Canada. In *Canadian Child Welfare Law: Children, Families and the State*, N. Bala, J.P. Hornick, & R. Vogi (Eds.), 199-245. Toronto: Thompson Educational Publishing Inc.

Sinclair, R. (2007a). Identity Lost and Found: Lessons from the Sixties Scoop. In *First Peoples Child and Family Review*, 3(1), 65-82.

Sinclair, R. (2007b). *All My Relations — Native Transracial Adoption: A critical case study of cultural identity*. University of Calgary: Doctoral Dissertation.

Sinclair, R. (2010). *Wicihitowin: Aboriginal Social Work in Canada*. Winnipeg: Fernwood Press.

Soullière, N. (1998). *Youth and Gangs: Various Views, Random and Varied Strategies*. Regina: Research Centre, Canadian Police College.

Stevenato and Associates, J. Budgell. (1998). *Repatriation of Aboriginal Families*. Toronto: Native Child & Family Services. Aboriginal Healing and Wellness Strategy.

Stolen Generations. (2003). *The Book of Voices: Voices of Aboriginal Adoptees and Foster Children*. Winnipeg: Aboriginal Healing Foundation.

Swidrovich, C. (2004). *Positive experiences of First Nations Children in non-Aboriginal foster or adoptive care: Deconstructing the "Sixties Scoop"*. Master's thesis. University of Saskatchewan. Saskatoon.

Timpson, J. (1995). Four Decades of Literature on Aboriginal Canadian Child Welfare: Changing Themes. In *Child Welfare*, 74(3), 525-546.

Totten, M. (2008). *Promising Practices for Addressing Youth Involvement in Gangs*. Vancouver, BC: British Columbia Ministry of Public Safety and Solicitor General, Victim Services and Crime Prevention Division.

Totten, M. (2009a). Aboriginal Youth and Violent Gang Involvement in Canada: Quality Prevention Strategies. In *IPC Review*, 3, 135-156.

Totten, M. (2009b). *Preventing Aboriginal Youth Gang Involvement in Canada: A Gendered Approach*. Prepared for Aboriginal Policy Research Conference, Ottawa. March 9-12, 2009.

Totten, M. (2012). *Nasty, Brutish, and Short: The lives of gang members in Canada*. Toronto: Lorimer Press.

Trevethan, S., J. Moore, S. Auger, M. MacDonald, & J. Sinclair. (2002). Childhood Experiences Affect Aboriginal Offenders. In *Forum on Corrections Research*, 14(3), 7-9. http://www.csc-scc.gc.ca/text/pblct/forum/e143/e143ind-eng.shtml.

Trocme N., B. MacLaurin, B. Fallon, J. Daciuk, D. Billingsley, M. Tourigny, M. Mayer, J. Wright, K. Barter, G. Burford, J. Hornick, R. Sullivan, & B. McKenzie. (2001). *Canadian Incidence Study of Reported Child Abuse and Neglect: Final Report*. Ottawa, Ontario: Minister of Published Works and sc.gc.ca/pphbdgspsp/publicat/cisfr-ecirf/pdf/cise.pdf.

Venkatesh, S.A. (1996). The Gang and the Community. In *Gangs in America*, C.R. Huff (Ed.). Thousand Oaks, CA: Sage Publications, Inc.

Waldram, J. B. (1997). *The Way of the Pipe: Aboriginal Spirituality and Symbolic Healing in Canadian Prisons*. Peterborough: Broadview Press.

Weinberg, M. (2008). Structural Social Work: A moral compass for ethics in practice. *Critical Social Work*, Vol. 9(1).

Wharf, B. (Ed.). (1993). *Rethinking child welfare in Canada*. Toronto: McClelland and Stewart.

First Peoples Child & Family Review

An Interdisciplinary Journal Honoring the Voices, Perspectives and Knowledges of First Peoples through Research, Critical Analyses, Stories, Standpoints and Media Reviews

Volume 7, Number 1, 2012, pp. 29-39

"But how could anyone rationalize policies that discriminate?: Understanding Canada's Failure to Implement Jordan's Principle

Jennifer King[a]

[a] MSW Student, University of Victoria, BC, Canada

Abstract

This article seeks to understand Canada's failure to implement Jordan's Principle, a child-first policy ensuring First Nations have access to the same level and quality of services available to other children. Policy-making in Canada rests firmly within a neoliberal political framework that extends market-based thinking to all aspects of social life. Neoliberal thought interlocks with stories of Other to inform notions of deservingness as well as one's potential as a valuable citizen with something to contribute. Social policy decisions, including the decision to implement a particular policy or not, offer a means through which to disseminate neoliberal values and norms.

As self-determining peoples with distinct rights, lands, and governance structures, First Nations transgress the image of the "good" neoliberal citizen in a variety of ways. Neoliberalism holds that punitive measures are sometimes needed to encourage citizens to adopt particular norms, and this allows policy makers to rationalize and justify policies that discriminate against First Nations children. Stereotypes about Indigenous peoples are also used to manipulate public sentiment in favour of government policy. Canada's failure to implement Jordan's Principle can be understood as part of a broader strategy to encourage First Nations to rescind their distinct rights and assimilate as good neoliberal citizens.

Introduction

First Nations children in Canada are routinely denied access to government services available to other children. Jurisdictional funding disputes between and within federal and provincial/territorial governments mean that First Nations children are often left waiting indefinitely for services they desperately need, or told that the services available to them are less than those available to other children (Auditor General of Canada, 2008, 2011; First Nations Child and Family Caring Society, 2005). Jordan's Principle is a child-first policy aimed at resolving such jurisdictional disputes and inequities. Jordan's Principle received unanimous support in the House of Commons in 2007. Despite this, governments at both the federal and provincial/territorial level have failed to implement it as it was written or intended.

Using Jordan's Principle as a case study, I argue that policymaking and implementation in Canada rest firmly within a neoliberal political rationality where moral decisions are those that reflect free market values. Neoliberal discourse interlocks with ideas of deserving and underserving and stories of Other to legitimate Canada's failure to implement social justice policy for First Nations children.

Address correspondence to:
Jennifer King, jlking@uvic.ca

Making Self Visible: Subject Position And Policy Analysis

While the practice of making oneself visible is slowly gaining ground in academic settings, and particularly within the context of critical, Indigenous, and anti-oppressive approaches (see for example, Brown & Strega (Eds.), 2005), the policy world remains largely preoccupied with the idea that policy-making should be a neutral process. What follows is my attempt to counter the assumed neutrality of policy work by making myself and my position visible as part of this analysis.

I am an Anishnabe woman of mixed descent. Heron's (2005) theory of subject position reminds us that ideas of self are complex, shifting, and contextual, and certainly my own positioning involves more than these two dimensions. Yet I mention gender and Indigenous descent specifically, as these facets have a particular influence on how I see and understand the world. My family ties are to the Wasauksing First Nation in Ontario, though I did not grow up in that community. My mother was adopted by a non-Indigenous family during the sixties and her experience as well as the intergenerational impacts of this have given me a special interest in the rights and well-being of Indigenous children. First Nations teachings hold that women have a special role in the well-being of children and families, and these teachings, too, have undoubtedly shaped my academic and work interests. As a First Nations person involved in social policy work, I have often wondered how governments are able to rationalize policy decisions that are clearly detrimental to Indigenous peoples, and especially First Nations children.[1]

While I have made the decision to write myself into this discussion, it is important to emphasize that this article is not about me, in the sense that it is informed by more than my personal experience. It feels odd to write about First Nations as "them" or "they" when in fact I am writing about my community, and I am personally affected by the discourses I describe. But my voice is not the focus of this discussion. This article draws on a range of voices, theoretical perspectives, and research/policy/legal documents as the focus of the analysis.

Jordan's Principle

Jordan River Anderson was a First Nations child from Norway House Cree Nation in Manitoba. Jordan was born with complex medical needs and spent the first two years of his life in hospital, where health care providers worked to stabilize his condition. Shortly after his second birthday, doctors said that Jordan was well enough to return home to Norway House. Tragically, Jordan remained in hospital unnecessarily for more than two years while the federal government and the province of Manitoba argued over who would pay for his at-home care. Jordan died in hospital at five years old, never having lived in a family home (First Nations Child and Family Caring Society, 2012).

First Nations children in Canada with status under the Indian Act are routinely denied access to government services, or receive a lesser quality and standard of care, simply because of who they are (Blackstock, 2011c). This situation is not limited to health care, but extends to other services such as education and child welfare. While provincial laws and standards apply on reserve, the federal government is responsible for funding most services in First Nations communities. The funding provided by the federal government is often lower than that provided by the provinces, with the result that services on reserve are generally fewer and of lesser quality than the provincial

1 'Indigenous peoples' refers to all people in Canada and internationally of Indigenous descent. First Nations is a term used in Canada and refers to one of three Indigenous groups (First Nations, Metis, and Inuit).

standard (Auditor General of Canada, 2008, 2011; First Nations Child and Family Caring Society, 2005; Office of the Parliamentary Budget Officer, 2009). In other instances, federal and provincial/territorial governments disagree as to which level of government is responsible for funding services for First Nations people, and disputes also arise between departments within the same level of government (Blackstock, 2011c; First Nations Child and Family Caring Society, 2005). The result is a jurisdictional vacuum in which First Nations children and their families are left waiting while governments argue over responsibility. Research conducted in 2005 sampled 12 First Nations child and family services agencies and found 393 jurisdictional disputes occurring in one year alone (First Nations Child and Family Caring Society, 2005).

Jordan's Principle is a child-first policy for resolving jurisdictional disputes within and between federal and provincial/territorial governments regarding services for First Nations children. It applies to all government services available to children, youth, and their families. Jordan's Principle states that when a jurisdictional dispute arises regarding the provision of a service or standard available to all other children, the government or department of first contact must meet the need and pay for the service without delay or disruption (First Nations Child and Family Caring Society, 2012). Once the needs of the child are met, the government or department of first contact can refer the matter to intergovernmental processes to discuss repayment.

Jordan's Principle passed unanimously as a private Members' motion in the House of Commons in December 2007. Years later, Jordan's Principle is still without full and proper implementation at either the federal or provincial/territorial level, and the federal government is attempting to further limit its responsibility by narrowing the scope of Jordan's Principle to apply only to children with complex medical needs requiring multiple service providers (First Nations Child and Family Caring Society, 2012). First Nations children continue to wait for government services, or receive services of a lesser quality and standard than those available to other children. As recently as 2011, 37 children with disabilities in Jordan's home community of Norway House Cree Nation were at risk of losing doctor-recommended services, such as occupational and speech therapy, as a result of similar jurisdictional disputes (Hanley, 2011).

Neoliberalism – What is it, and Why Does it Matter Here?

How might we begin to understand the government's failure to implement Jordan's Principle? I suggest that policy decisions in Canada are driven by more than research evidence, considerations of justice, equality, or, in this case, the "best interests of the child." As we shall see, policy-making in Canada rests firmly within a neoliberal framework that poses significant barriers to the implementation of community-specific, social justice policy.

While frequently discussed in terms of its fiscal policies and impacts, Brown (2005) argues that neoliberalism is far more than an economic approach. It is a political rationality that involves "*extending and disseminating market values to all institutions and social action*" (Brown, 2005, p. 40; emphasis in original). It invokes a social analysis where free-market principles become the basis for decision-making in all spheres. Moral decisions are those that align with liberal economics, so there exists no morality other than that based on market values (Brown, 2005).

Neoliberalism sees the state as having little or no role in the care of individuals or families. The good neoliberal citizen is "measured by their capacity for 'self-care' — the ability to provide for their own needs and service their own ambitions" (Brown, 2005, p. 42). As such, gross disparities in income and circumstance are not something to be addressed by the state, but rather something

to be managed and offset at the individual level. Those who require help or support from the state are branded as having failed to manage their lives appropriately. Citizens must be taught, therefore, how to make "good" choices based on the ideals of self-sufficiency, "rational" decision-making, efficiency, and prudence.

Social policy represents an important mechanism through which the state can disseminate neoliberal values and norms. In contrast to classical economic liberalism,

> neoliberalism does not conceive of either the market itself or rational economic behavior as purely natural . . . the economy must be directed, buttressed, and protected by law and policy as well as the dissemination of social norms designed to facilitate competition, free trade, and rational economic action (Brown, 2005, p. 41).

The role and function of social policy, then, involves shaping subjects in the image of the good neoliberal citizen. This is done by enacting policies that encourage subjects to act in particular ways or make particular choices — "choice" being a loose term, as it often involves selecting from a limited range of unsavory or punitive options. At the core, neoliberal social policies are designed to encourage independence in the form of labour market participation and reliance on the marketplace for the provision of things formally considered a right of social citizenship, such as health care, security in old age, or financial support during times of unemployment.

While social policy is indeed an important tool in shaping good neoliberal citizens, we must remember that policy does not literally make or create us. Policy encourages particular actions and choices, but its real power lies in the potential to define and shape ideas of normality (Brown, 2005). Social policy is a vehicle through which particular ideas, values, and assumptions are cast as "good" and "normal," and through which such ideas are taken up by subjects, internalized, and reproduced. In this sense, social policy is not so much about governing subjects in a direct way, but rather about *inducing subjects to govern themselves according to a particular image*. Policy decisions, then, are about far more than defining a particular course of action or response. They are about power and the "management of life" (Drinkwater, 2005, p. 230).

Thus, in addition to its tangible or physical impacts, social policy also re/produces ideas about who "we" are, who "they" are, as well as the nature and limits of one's rights. Far beyond simply exploring the impacts of social policy, critical analysis must ask: what unspoken stories are being told and what values, assumptions, and interests shape the debate? How are certain identities and bodies devalued through discourse, and how are these ideas reflected in, reproduced, and reinforced by social policy? These are the questions we must ask in analyzing Canada's failure to implement Jordan's Principle.

Neoliberal Equality: The Deservingness of Some is Always Already Mitigated

The distinction between those who are "deserving" and those who are not has long been a feature of social policy discourse. Contemporary notions of deserving and undeserving build on the discourse of classical liberalism, but with a decidedly neoliberal flavour. Under classical liberalism "social policy was limited to assisting the 'deserving poor' and reinforcing the work ethic among the rest" (Mahon, 2008, p. 343). The undeserving poor were persons (usually men) who were considered able but unwilling to work (O'Connell, 2009). Today, assumptions of deservingness have shifted beyond the dichotomy of able/unable to impose free market values

and assumptions on all aspects of social life. Citizen-subjects are deserving only insofar as they are willing to accept and embody neoliberal social norms.

Neoliberal ideas of deserving/undeserving are reflected not only in the nature of policy, but also in how the public understands and responds to these decisions. This can be seen, for example, in the backlash toward employment equity policies. Neoliberal thought frames the market as a neutral force that rewards those who work hard. From this perspective, if someone is really the "best person for the job," they should be able to *earn* the position based on merit alone (Creese, 2007). The discourse of deserving and undeserving is also present in polices of income or social assistance, and various authors have shown how these ideas are taken up by welfare workers or case managers who assess and measure the "deservingness" of clients based on their willingness to model neoliberal values such as independence, motivation, and taking responsibility for one's situation (McDonald & Marston, 2005; Moffatt, 1999).

It would be a mistake, however, to assume that ideas of deserving and undeserving are shaped only by neoliberal thought. Neoliberalism melds with concepts of "normal" to produce complex and shifting ideas of who is deserving, who is not, and in what context. Normal should not be mistaken for neutral as ideas of normality are in fact reflective of a very particular image: white, male, non-"disabled," cisgendered, heterosexual, and middle class — what Fellows and Razack (1998) refer to as the "unmarked" subject. Discourses of normal and Other influence beliefs about the extent to which people are to blame for their situation, as well as their potential as valuable citizens with something to contribute.

As described by Dominelli (2002), Othering is a process by which relations of dominance are legitimated and reproduced. Those who do not fit within the bounds of normal are cast as Other — as abnormal or "different." Othering creates a dichotomy between "us" and "them," between those who belong and those who are or can be justifiably excluded. Othering also serves to legitimate the assumption that "we" (those in positions of dominance) know what is best for "them," and thus a denial of autonomy and self-determination. This negation of value is particularly evident with respect to First Nations people and First Nations children.

Mahon (2008) argues that Canada's history of social liberalism in the post-war era has tempered the forces of neoliberalism, resulting in an economic and political approach she terms "inclusive liberalism." While still embracing many of neoliberalism's social norms and economic policies, inclusive liberalism acknowledges the need for a certain amount of social investment in order to generate human capital and "empower" citizen-subjects to participate in the paid labour market. Not everyone is presumed deserving of this investment, however. Mahon (2008) writes that inclusive liberalism is characterized by a concern for "the child." Canada's federal government, however, sees fit to underfund education on reserves by an estimated $3,400 per year per child, as compared to provincial/territorial standards ("Ottawa should close gap", 2011; see also Office of the Parliamentary Budget Officer, 2009). Child welfare services are similarly underfunded, with First Nations children on reserve receiving an estimated 22 percent less than other children (McDonald & Ladd, 2000, as cited in Blackstock, 2011a).

First Nations peoples transgress the image of the unmarked subject and good neoliberal citizen in a variety of ways. As self-determining peoples, First Nations possess distinct rights, lands, and governance structures — a scenario that does not fit well with what Cunningham and Baeza described as "the new global policy theme of reintegrating marginalised communities into the mainstream" (2005, p. 470). Social policy decisions offer a means through which to undermine these distinct rights and assimilate First Nations as good neoliberal citizens.

Impacts of Policy Decision Not to Implement Jordan's Principle

Social policy decisions are decisions of power. As Drinkwater (2005) describes, power acts on subjects not by making their decisions but by structuring the field of possible actions. Thus we may ask, how does power structure the field of possible actions for First Nations children and families who are denied access to health and other government services? What impact do these policies have?

In some instances, First Nations youth living on reserve must leave home to attend high school, either because there is no high school in the community or because federal underfunding makes it impossible for communities to provide the quality of education found in provincial schools (Blackstock, 2011c). In the case of children with disabilities or special medical needs, First Nations governments often have little alternative but to absorb the necessary costs, so that children are not forced to go without doctor-recommended services. This, however, requires a redirection of funds, and thus the inability to meet other community needs and governance priorities. This is not a permanent solution, as communities generally do not have the funds to cover these costs in the long term — nor is it their responsibility to do so. In still other cases, parents or caregivers are forced to quit their jobs to assume duties ordinarily performed by a trained professional (see, for example, Ridgen, 2012). In this circumstance, the neoliberal emphasis on paid employment collides with a parallel belief in individual, family-based responsibility for dependents that require care (Mahon, 2008). In yet other cases, there remains but one viable course of action for ensuring the needs of children are met. Caregivers may find themselves with no alternative but to place children in foster care, not because of child protection issues but because it is the only way to ensure the child has access to the services they need (see, for example, Ranxarex, 2010). While federal and provincial/territorial governments cannot seem to agree on who will pay for services in a child's family home, they do have a system in place for providing services to First Nations children in child welfare care.

Common to all these scenarios is the denial of state responsibility (legal, constitutional, or fiduciary), the undermining of First Nations governments as sovereign entities, and the push for First Nations to rescind their status as distinct people with distinct rights and lands as the surest course in receiving adequate care and ensuring their children have access to the same level and quality of services available to other children. As has been observed, "The lack of services, opportunities and deplorable living conditions characterizing many of Canada's reserves has led to mass urbanization of Aboriginal peoples" (First Nations Child and Family Caring Society, 2005, p. 90). In this context, the conscious underfunding of basic services such as health care, safe-drinking water, child welfare, housing, and education is perhaps best understood as a form of *punishment* for daring to resist what Drinkwater (2005) refers to as the normalizing and productive forces of inclusion.

The Power of Discourse: Stories, Assumptions, and Social Policy

Policy-making is about more than identifying a particular course of action or approach. It is also a battle of ideas and perceptions, and thus involves a discursive campaign to justify and rationalize the decisions made. Indeed, the discrimination experienced by First Nations children is so blatant that it must be rationalized, justified, reframed as something else. In doing so, policy-

makers draw on existing stereotypes and misunderstandings to manipulate public sentiment in favour of government policy. This is accomplished by shifting accountability from federal and provincial/territorial governments and holding First Nations, collectively and as individuals, responsible for the discrimination they experience.

Cunningham and Baeza (2005) illustrate the power of discourse in framing policy decisions related to Indigenous peoples. Though their analysis deals with the Australian context, my experience as a First Nations woman involved in policy issues tells me that many if not all of these stories and assumptions are present in Canada as well. These discourses include the widespread perception of accountability problems among Indigenous organizations and governments, as well as doubts regarding their competency, honesty, representativeness, and legitimacy. The relative success of these organizations or governments is measured against a host of unrealistic expectations that hold Indigenous leaders responsible for "resolving" centuries of colonial policy and oppression. When these expectations go unmet, Indigenous governments and organizations are branded as ineffective or underachieving (Cunningham & Baeza, 2005).

In addition to this, there exists in Canada a particular discourse that paints First Nations as the undeserving recipients of government hand-outs. This includes the false perception that First Nations receive too much government funding, do not pay taxes, and have a lot of money (see for example, Ridgen, 2012). High rates of unemployment on reserve are detached from their structural origins and construed as the result of individual deficit, motivation, laziness, or a poor work ethic. These ideas serve to bolster and reinforce the idea of First Nations as a collective Other. Constructed in opposition to the good neoliberal citizen, these ideas reproduce relations of dominance, suggesting that "we" know what "they" need. As Dominelli writes, the result is a "'them-us' division which privileges those who are considered 'us' and deemed to 'belong' to a particular social order. . . . meanwhile those cast in the 'them' category are outsiders who are not valued as human beings on the same basis as those in the 'us' groups" (2002, p. 17). This sets the stage for discriminatory treatment on the grounds that "they," by virtue of inherent shortcomings, need to be treated differently from "us."

Finally, because neoliberalism sees the state as having zero responsibility in terms of job creation, First Nations are blamed for choosing to live in poverty rather than "doing everything they can to find work," a sentiment which is generally code for "they should move to a place where more opportunities exist." First Nations governments are also blamed for failing to create jobs and improve conditions on reserve, when in fact the economic possibilities and options available are heavily constrained by the federal government through the *Indian Act*.

Taken together, this discourse feeds the perception that there should be "more to show for governments' efforts in Indigenous affairs" (Cunningham and Baeza, 2005). The poor socio-economic conditions on many First Nations reserves are used as evidence to bolster the discourse that Indigenous governments are incapable of managing their own affairs, and to reinforce the idea that the path forward lies in accepting government policy and embracing neoliberal social norms. By framing the issue this way, governments are able to capitalize on the neoliberal discourse of wasted public spending and the need for individual accountability, and manipulate public perception in favour of policy approaches that seek to absorb First Nations into the larger social body. Terms such as "integration" are used to mask what is in fact a tacit policy of normalization and assimilation. As Palmater (2012) recently observed with respect to the 2012 federal budget, the focus is integrating Indigenous peoples into society "as a labour source, as tax payers and as individual property owners." Missing from this discussion is any whisper that

the socio-economic conditions on reserve are in fact the result of policy decisions, legislation, and gross underfunding, primarily at the federal level. As Blackstock writes, "Canada will often cite how much it spends on First Nations children without drawing attention to the fact that this amount falls far short of what is required" (2011a, p. 10).

Neoliberal Morality: "But How can Governments Possibly Rationalize Discrimination against Children?"

Morrow, Wasik, Cohen, and Elah-Perry argue that the influence of neoliberal thought in Canada has led to the fiscalization of policy decisions — that is, "policy decisions being made based on budget concerns rather than social and moral values" (2009, p. 669). Neoliberalism, as we have seen, is about more than economic policy, yet fiscal restraint and minimal social spending remain fundamental to the broader ideological approach. Thus, a stated commitment to implementing Jordan's Principle is offset by the concern for setting a precedent of sorts; governments do not want to accept responsibility in even one case, because one case could become two, two could become three, and three could be taken as an admission of jurisdictional responsibility, which of course entails a funding responsibility as well.

Still, one might wonder how even the most fiscally conservative government or individual could justify discrimination based solely on economic grounds. Brown's (2005) work, however, suggests that policy decisions under neoliberalism *are* subject to moral evaluation, but that this morality reflects free market values rather than values of equity, human rights, or social justice. As she writes, "neoliberalism equates moral responsibility with rational action; it erases the discrepancy between economic and moral behavior by configuring morality as entirely a matter of rational deliberation about costs, benefits, and consequences" (2005 p. 42). This suggests that decision makers are able to rationalize failure to implement Jordan's Principle by drawing on the discourse that says First Nations are to blame for the conditions on reserve, and that the most rational, cost-effective, and beneficial path lies *not* in respecting Indigenous sovereignty but in absorbing this "marginalized" community into mainstream society.

An analysis of neoliberal morality thus sheds light on how governments are able to rationalize policy decisions that perpetuate poverty on reserves. Neoliberalism sees poverty as an inevitable feature of developed economies and holds individuals responsible for managing this circumstance (Lister 1998; Mahon, 2008). From this perspective, the failure to address structural poverty is not immoral because poverty is not something to be "solved" by the state. This reticence to address poverty in general is compounded by a distaste for First Nations sovereignty in a political climate that favours integration as the preferred means of addressing community-based issues. Distinct First Nations spaces are not seen as an efficient or rational investment.

In this way, Canada's failure to implement Jordan's Principle can be understood as part of a broader strategy to encourage First Nations to become good neoliberal citizens, rescind their status as separate, and assimilate into the broader social body. This is accomplished by devaluing certain spaces and ways of being to the point that living and performing as "normal" can seem preferable to living as one *is* and being marked as Other. The underfunding of basic services on reserve can be seen as a punitive measure, a tacit punishment for daring to resist the forces of inclusion. Not unlike the workhouse philosophy of classical liberalism, neoliberalism believes that punitive measures are sometimes needed to encourage citizens to act responsibly, as defined in neoliberal terms (McDonald & Marston, 2005; Moffatt, 1999). In this context, punitive polices that seek to "activate" or "empower" subjects are not acts of discrimination or injustice, but rather

moral polices that "help" subjects embrace their role as good neoliberal citizens. In this light, we can begin to understand how governments are able to discriminate against First Nations children while at the same time maintaining that their approach is one of good and moral policy.

Looking Forward

Indigenous families, communities, and leaders are taking action to counter the forces of neoliberalism, assert their rights, and demand better for their children. In 2011, Maurina Beadle and the Pictou Landing First Nation filed a federal court case against Canada for failing to implement Jordan's Principle. Pictou Landing is a small First Nations community in Nova Scotia. Maurina Beadle's 17-year old son Jeremy was born with multiple disabilities and requires complete personal care. Maurina suffered a stroke in May 2010 and, as a result, is no longer able to meet all of Jeremy's physical needs. Despite the fact that the family's situation clearly meets even the narrow and improper interpretation of Jordan's Principle, it was soon apparent that the neither the federal government nor the province of Nova Scotia was willing to pay for Jeremy's at-home care until the jurisdictional dispute was settled (Blackstock, 2011b).

Ignoring provincial health policy and a recent federal court ruling on care services for people with disabilities, both the federal and provincial government have since decided that Jeremy is entitled only to a fixed and capped amount for in-home support (Blackstock, 2011b; *Nova Scotia (Community Services) v. Boudreau*, 2011; *Pictou Landing Band Council and Maurina Beadle v. Attorney General of Canada*, 2011). As this amount is not sufficient to meet Jeremy's care needs, government representatives have suggested that he be placed in a residential care facility far from his community. As Pictou Landing First Nation stated in filing the case:

> The lack of support and funding for a child like Jeremy to remain in the community and the push to institutionalize him can be likened to Residential School policy, where the government decided that it is better able to care for First Nations children in an institution rather than the First Nation community in which they are a member (Pictou Landing First Nation, 2011).

The case was heard in Federal Court in June 2012 but is still awaiting a ruling.

Legal proceedings such as the case filed by Maurina Beadle and the Pictou Landing First Nation offer an important challenge to the neoliberal discourse that seeks to justify discrimination against children and undermine the rights of First Nations peoples. First Nations mothers should not have to fight for the right to care for their children simply because they are First Nations and live on reserve. One thing is clear: challenging policy requires more than just "good evidence" but also attention to the stories and assumptions that shape, inform, and reinforce policy decisions. We all have a role to play in this process. It is much easier for governments to implement policies or undermine equity-seeking organizations where no public opposition exists. Full and proper implementation of Jordan's Principle may run contrary to the forces of neoliberal thought, but there are many others who reject this concept of morality. Jordan's Principle is supported by over 6,600 organizations and individuals across Canada, including large and influential groups such as the Canadian Paediatric Society, the Canadian Federation of Nurses, the Canadian Social Work Association, and the National Youth in Care Network (Blackstock, 2011b; First Nations Child and Family Caring Society, 2012).

In Closing

In this article I have drawn attention to the negative discourses affecting Indigenous peoples, because it is these stories and assumptions that help us understand how governments are able to justify assimilationist policy choices, and how public opinion can be manipulated in favour of these decisions. But these are not the only stories that exist. My mind now wanders to the stories *I* know about First Nations peoples. These are not stories of defeat or desperation, but rather of generosity, pride, care, strength, art, happiness, and laughter. They are the stories of families like Maurina and Jeremy. They are stories of resistance and love.

We must remember that neoliberal discourse and stories of Other draw power only through our re-telling or enactment. First Nations and allies are challenging this discourse by telling a different story. In our story, there is simply no rationalization for policies of discrimination and inequity.

You can sign up to support Jordan's Principle at www.jordansprinciple.ca

References

Auditor General of Canada. (2008). *First Nations child and family services program — Indian and Northern Affairs Canada* (2008 May report of the Auditor General of Canada). Retrieved from Office of the Auditor of Canada website: http://www.oag-bvg.gc.ca/internet/English/parl_oag_200805_04_e_30700.html.

Auditor General of Canada. (2011). *Programs for First Nations on reserves* (2011 June status report of the Auditor General of Canada). Retrieved from Office of the Auditor of Canada website: http://www.oag-bvg.gc.ca/internet/English/parl_oag_201106_04_e_35372.html.

Blackstock, C. (2011a). The Canadian Human Rights Tribunal on First Nations child welfare: Why if Canada wins, equality and justice lose. *Children and Youth Services Review, 33*(1), 187-194.

Blackstock, C. (2011b). Jordan's Principle and Maurina Beadle's fight for implementation. *Eastern Branch Ontario Association of Social Workers Bulletin, 37*(3), pp. 12-14. Retrieved from http://www.oasw.org/media/83292/EasternBulletin-Fall2011.pdf

Blackstock, C. (2011c). *Jordan & Shannen: First Nations children demand that the Canadian Government stop racially discriminating against them. Shadow report: Canada 3rd and 4th periodic report to the UNCRC.* Ottawa: First Nations Child and Family Caring Society of Canada.

Brown, L., & Strega, S. (Eds.). (2005). *Research as resistance: Critical, Indigenous, and anti-oppressive approaches.* Toronto: Canadian Scholars' Press.

Brown, W. (2005). Neo-liberalism and the end of liberal democracy. In W. Brown (Ed.), *Edgework: Critical essays on knowledge and politics* (pp. 37-59). Princeton: Princeton University Press.

Creese, G. (2007). Racializing work/reproducing white privilege. In V. Shalla & W. Clement (Eds.), *Work in tumultuous times: Critical perspectives* (pp. 192-226). Montreal and Kingston: McGill-Queen's University Press.

Cunningham, J. & Baeza, J. (2005). An "experiment" in indigenous social policy: The rise and fall of Australia's Aboriginal and Torres Strait Islander Commission (ATSIC). *Policy & Politics, 33*(3), 461-473.

Dominelli, L. (2002). *Anti-oppressive social work theory and practice.* New York: Palgrave Macmillan.

Drinkwater, C. (2005). Supported living and the production of the individual. In S. Tremain (Ed.), *Foucault and the government of disability* (pp. 229-244). Ann Arbor: University of Michigan Press. Fellows, M. L., & Razack, S. (1998). The race to innocence: Confronting hierarchical relations among women. *The Journal of Gender, Race, and Justice, 1*(2), 335-352.

First Nations Child and Family Caring Society of Canada. (2005). *Wen: De: We are coming to the light of day*. Ottawa: First Nations Child and Family Caring Society of Canada.

First Nations Child and Family Caring Society of Canada. (2012). *Jordan's Principle* Web site. Retrieved from www.jordansprinciple.ca.

Hanley, W. E. (2011, February 23). [Letter to Prime Minister Stephen Harper on behalf of United Food and Commercial Workers Canada]. Retrieved from http://www.fncaringsociety.com/sites/default/files/jordans-principle/docs/Letter-from-UFCW.pdf.

Heron, B. (2005). Self-reflection in critical social work practice: Subjectivity and the possibilities of resistance. *Reflective practice, 6*(3), 341-351.

Lister, R. (1998). From equality to social inclusion: New Labour and the welfare state. *Critical Social Policy, 18*(2), 215-225.

Mahon, R. (2008). Varieties of liberalism: Canadian social policy from the "golden age" to the present. *Social Policy & Administration, 42*(4): 342-361.

McDonald, C. & Marston, G. (2005). Workfare as welfare: Governing unemployment in the advanced liberal state. *Critical Social Policy, 25*(3): 374-401.

Moffatt, K. (1999). Surveillance and the government of the welfare recipient. In A. Chambon, A. Irving, & L. Epstein (Eds.), *Reading Foucault for social work* (pp. 219-246). New York: Columbia University Press.

Morrow, M., Wasik, A., Cohen, M., & Elah-Perry, K. (2009). Removing barriers to work: Building economic security for people with psychiatric disabilities. *Critical Social Policy, 29*(4): 655-676.

Nova Scotia (Community Services) v. Boudreau, 2011 NSSC 126.

O'Connell, A. (2009). Building their readiness for economic freedom: The new poor law and emancipation. *Journal of Sociology and Social Welfare, 36*(2): 85-103.

Office of the Parliamentary Budget Officer. (2009, May 25). *The funding requirement for First Nations schools in Canada*. Ottawa: Parliamentary Budget Officer.

Ottawa should close gap in funding for aboriginal education [Editorial]. (2012, March 15). *The Globe and Mail*. Retrieved from http://www.theglobeandmail.com.

Palmater, P. (2012, March 30). Budget 2012: The battle lines have been drawn for Canada's Indigenous peoples [Web log post]. Retrieved from http://rabble.ca/blogs/bloggers/pamela-palmater/2012/03/federal-budget-2012-battle-lines-have-been-drawn.

Pictou Landing Band Council and Maurina Beadle v. Attorney General of Canada, T-1045 -11 (Federal Court, 2011). Retrieved from http://www.fncaringsociety.com/sites/default/files/jordans-principle/docs/Applicants-Factum-T-1045-11.pdf.

Pictou Landing First Nation. (2011, June 27). Pictou Landing First Nation mother fights for the right to care for severely disabled son [Press release]. Retrieved from http://www.fncaringsociety.com/sites/default/files/jordans-principle/docs/PictouLanding-JP-June2011.pdf.

Ranxarex. (2010, May 11). Grandma who put her grandson into foster care to get services (he was on reserve) [Video file]. Retrieved from http://www.youtube.com/watch?v=sVUgVFGm0R8.

Ridgen, M. (Host). (2012, February 29). Jordan's Principle [series episode]. In F. Compton (Producer), *APTN Investigates*. Winnipeg: APTN. Retrieved from http://aptn.ca/pages/news/category/investigates/.

First Peoples Child & Family Review

An Interdisciplinary Journal Honoring the Voices, Perspectives and Knowledges of First Peoples through Research, Critical Analyses, Stories, Standpoints and Media Reviews

Volume 7, Number 1, 2012, pp. 40-51

Children for Social Justice

Jeff McCrossin

MSW Student, Carleton University, Ottawa, ON, Canada

Abstract

It is often assumed that children lack the developed capacity to understand complicated political issues (for example, Arendt, 1959; Pearce, 2011; and Warmington, 2012a, 2012b). This assumption is contested through a review of the literature examining adult conceptions the child, and children's rights to political participation, citizenship, and direct representation (Steffler, 2009; Wall & Dar, 2011; Wyness, Harrison, & Buchanan, 2004). A variety of historical and contemporary examples of children engaging in social justice campaigns and movements are provided (Elshtain, 1996; Milstein, 2010; Smith, 2012; Traubman, 2005; Bergmar, 2010). A potential means for supporting children in social justice engagement is explored through social justice education (Dover, 2009; Kelly & Brooks, 2009).

Introduction

A recent Globe and Mail blog post (Pearce, 2011) asks readers to consider the "irresponsibility" of parents taking children to protests. Pearce (2011) reports that Toronto "City Hall was swarmed with a mini-army of babies, toddlers and children whose parents had brought them to protest potential cuts to city-run daycare programs." This post raised questions about children's right to protest, their capacity to understand political issues, and how adults conceptualize children. This article will attempt to respond to such questions by putting common concerns regarding children and political action into the context of social justice.

As indicated by Pearce (2011) and others (Arendt, 1959; Warmington, 2012b), some facets of society consider the child to be a blank slate, isolated in the private or familial world without the developed capacity to make sense of complicated political issues. Instead, the position taken in this article is that children are already political individuals influenced by private and public spheres through interdependence with adults in their lives (Elshtain, 1996; Kelly & Brooks, 2009; Milstein, 2010; Wall & Dar, 2011). Children have the right to make a difference through political participation, citizenship, and direct representation (Wall & Dar, 2011). As will be discussed below, children throughout history have shown their capacity to break new ground toward equity and social justice. Conceptual models of the child will also be discussed in relation to how adults view children engaged in social justice. Additionally, social justice education will be examined, through a limited review of the literature, as a potential means for advancing social justice engagement for children. Finally, arguments will be made for a wider interpretation of children's rights in relation to political power.

Corresponding author:
Jeff McCrossin, jeff.mccrossin@gmail.com

Children Engaging in Social Justice

Children were on the front lines in the movement to end segregation in the southern United States. Responding to their involvement, political theorist Hannah Arendt (1959, cited in Elshtain, 1996) expresses concern that adults are ridding themselves of their responsibility to provide guidance to children. She asks, "Have we now come to the point where it is the children who are being asked to change or improve the world? And do we intend to have our political battles fought out in the school yards?" (Arendt, 1959, p. 50). She wonders how children could be charged with the task of integration if generations of adults were unable to quell the unrest between the black and white communities in the south.

Arendt's (1959) argument is entrenched in her vision of isolated private, public, social, and political spheres. Children, according to Arendt, should exist only in the private sphere, protected under parental guidance. Elshtain (1996) reiterates Arendt's fear that,

> If parents collapse, or are stripped of their authority in relation to children, the result will be more conformism of children with their peer group, or age cohort, and a growing homogenization of society. Those capable of resisting will likely be few and under tremendous pressure to succumb to the wider surroundings (p. 15–16).

In Arendt's (1959) view, only adults are able to be individuals as children are incapable of resisting conformity. Arendt appears to see children as benighted vessels for which parents and educators needed to provide teachings relative to the world in which they were born. According to Elshtain (1996), Arendt despised progressive education "in which children are enjoined to create their own environment for learning, free from adult authority" (p. 17). She felt that this type of education encouraged abandonment and betrayal of children. Arendt provides examples of children and youth being used as a political force by Hitler during the Second World War. These children under Hitler's command were "intimidating, shaming, humiliating, betraying, and exposing adults, their own parents and teachers, for insufficient ideological ardor" (Elshtain, 1996). Arendt later concedes that black children of the south were in a dissimilar position from Jewish children in Nazi Germany. The context and outcomes were clearly different.

A more recent criticism of children actively engaging in social justice campaigns (and more outspoken than that of Pearce, 2011) appeared online in May 2012 in Sun News, the right-wing media organization website. Joe Warmington (2012b) reports about young students from The Grove Community Alternative School in Toronto engaged in a project raising concerns over the proposed Enbridge pipeline in western Canada. The children crafted a pipeline showing potential negative social and environmental impacts of the Enbridge pipeline and put it on public display. The story includes a quote from the school's press release for the event, "Children have a strong sense of justice and empathy.… They recognize the unfairness of putting a pipeline through indigenous territory without consent." In a similar report, the same author alleged that the teacher, "with ear rings and a ring through his nose," was "indoctrinating" the students (Warmington, 2012a). He further argues that, at eight years old, children should not be aware of social injustice, "or have an opinion on anything" (Warmington, 2012b). However, being unaware of social injustice does not preclude capacity to understand it (Wyness et al. 2004). Warmington (2012b) suggests that perhaps the Children's Aid Society should be notified, implying that the teacher's efforts to promote social justice education were abusive in nature. Although Warmington provides no evidence to legitimize his claims, he argues that his position reflects that of hundreds of readers who are "disgusted" by this alleged abuse of children (2012b).

Regardless of whether adults accept the idea of children as political individuals, examples of children engaging in inherently political social justice campaigns span the globe, and date back over 100 years.

In 1903, Mother Jones marched 125 miles with 300–500 children to the summer home of then President Theodore Roosevelt to protest wages and conditions of child labour (Elshtain, 1996). This is in opposition to Arendt's (1959) notion that children should not be dragged into the public realm. But in this case, Elshtain notes, "children [were] politicized, drawn into protests, strikes, marches and potential danger in order that they may return to the schools, neighborhoods and playgrounds where they belong" (p. 20). Mother Jones showed that the children were already in full view of the public; their political actions were necessary to achieve greater social justice. Mother Jones's message to her critics (related by Elshtain, 1996, p.20): "You think taking children on protests is shameful? No, it is shame that drives them to protest."

Elshtain (1996) also describes the "Children's Miracle" of 1963, where children in Birmingham, Alabama, protested in support of desegregation. The children, as young as six years old, refused orders by police to disband and were led to prison cells. Elshtain describes the cascading effect of the actions taken by these children:

> The campaign gained momentum. Soon 958 children had signed up indicating their willingness for jail and some 600 were in custody. Protest speakers extolled the courage of children. More children took to the streets and parks. Scenes of children being hit by projectiles of water from firehoses and lunged at by police dogs helped to galvanize the American conscience (p. 21).

While the white leaders of Birmingham were concerned that children were being used as political tools, Martin Luther King Jr. praised the courage shown by the children for standing up for what they believed in.

In Pakistan, Iqbal Masih began working as a debt slave in a carpet factory when he was about five years old (Bergmar, 2010). Iqbal became known around the world for standing against those who forced him into child labour and for successfully encouraging other children to join him. Iqbal was murdered under mysterious circumstances in 1995, but was posthumously awarded the World Children's Prize for the Rights of the Child (Bergmar, 2010) and was the inspiration for child-activist Craig Kielburger, founder of Free the Children, an international charitable organization that builds schools (among other initiatives) in developing nations (Steffler, 2009).

In May 2012, children in Israel stood against the massacre of 50 Syrian children during that country's ongoing civil war (Benari, 2012). The children held a candlelight vigil outside the Russian embassy in Tel Aviv, signifying an understanding of complex global politics.

In Buenos Aires in 2004, a class of fifth-grade children (ages 10–15) managed to get their teacher dismissed after she had mistreated a number of students (Milstein, 2010). Other teachers and staff at the school initially dismissed that particular class of children as being "difficult," "undisciplined," and having "learning problems." Despite coming from poor neighbourhoods and struggling academically, the students demonstrated their capacity to understand that they were being treated unjustly. In response to repeated acts of violence toward them, the students held a protest in their classroom with rhythmic clapping and shouts of "Justice!" akin to frequent local "street mobilizations" in which community members had demanded solutions to violence against youth (Millstein, 2010, p. 139). Their collective action in the classroom that day gathered the support of their parents, other teachers, and the headmistress of the school, leading to the dismissal of their teacher. Milstein attributes much of the students' success to "taking their

problem out of the 'private' classroom and into the 'public' school," thus extending the range of their voices.

In 2005, a group of children of foreign workers in Israel attended a Supreme Court hearing regarding a petition for their legal residency status (Traubman, 2005). Children participating in these legal hearings received experiential learning opportunities, through exposure to the court system, but also through challenging inequitable systems of power. In a similar fashion in February 2012, hundreds of Canadian elementary and high school students, supported by their teachers and families, attended a Federal Court judicial review of a human rights case regarding First Nations child welfare. In a coordinated gathering on Parliament Hill, they delivered letters objecting to inequality in First Nations child welfare, health care, and education to their political representatives (Smith, 2012).

Shannen Koostachin, from the Attawapiskat First Nation in Northern Ontario, began a campaign in 2008 for equitable education for First Nations children (About Shannen, 2012). Though only 12 years old, Shannen understood that First Nations children were not being treated fairly, and led hundreds of children from across Canada into peaceful action through speeches, letter writing, and social media. Shannen passed away in 2010, but thousands of child and adult supporters have joined the social justice campaign called Shannen's Dream (About Shanne, 2012), perpetuating her efforts.

It was estimated that over a thousand school-aged children gathered on Parliament Hill (and in 50 communities across the country) on June 11, 2012 in support of Shannen's Dream and a number of other campaigns facilitated by the First Nations Child and Family Caring Society of Canada for a walk dubbed the Our Dreams Matter Too (Blackstock, 2012). On the fourth anniversary of the Prime Minister's apology for Residential Schools (Harper, 2008), the crowd of First Nations and non-Aboriginal children stood in solidarity to deliver letters they had written, asking the government to provide equitable services—including those related to health, education, and child welfare—to all children within Canadian borders. Four years after the apology, First Nation children and families continue to be treated as second class citizens by the Government of Canada. This protest took an inherently different approach to instigating change than those initiated by adults. Rather than debating how legislation such as the Indian Act should change, or discussing the complicated relationship between First Nations and the Government of Canada, the children articulated their concerns on the basis of values, such as equality, fairness, and non-discrimination. Children in attendance also received messages of solidarity between First Nations and non-Aboriginal Canadians, rather than charity or pity that would perpetuate a false hierarchy.

Contradictions in Acceptance of Political Children

How can we commend children engaged in social justice campaigns such as those led by Mother Jones, Martin Luther King Jr., and young leaders such as Shannen Koostachin and Iqbal Masih, while vehemently opposing political actions of children led by genocidal tyrants like Hitler, Pol Pot, Qaddafi, and others? Elshtain (1996) explains that the contexts are distinct:

We blanch when we see children giving a Nazi salute. We are moved when we see children singing hymns and marching off to jail in a desegregation protest. Are we bereft of ways to adjudicate these and other cases of political children? Does it come down to whether we are pro-Nazi or anti-segregation? (p. 23).

In some circumstances, such as the Children's Miracle of 1963, children display incredible "clear sighted political courage;" in others, "fear and ferocious zealotry" (Coles, 1967 as cited in Elshtain, 1996, p. 20–21).

Young anti-abortion protesters are key contemporary examples of children engaged in political action that is disapproved by the more liberal base of western society (Elshtain, 1996). As a subject of political action, abortion is more morally ambiguous than desegregation in schools. According to Elshtain, the response of critics opposing young anti-abortion protesters has been similar to that of those opposing segregation. There appear to be fears that children do not have the capacity to be pro-choice or pro-life, and are being inappropriately led or even abused by the adult anti-abortionists. Elshtain (1996) criticizes this approach to framing the argument:

> The mistake pro-choice critics of pro-life child protesters make in all of this is their politically repressive embrace of the language of 'child abuse' and their representation of these children as manipulated automatons with 'no concept of what they're doing,' (p. 23).

An argument such as this directly contradicts those made by the liberal base for including children in those social justice movements which they support. Furthermore, arguing that children are being brainwashed into joining anti-abortion protests contradicts evidence that children have the capacity to develop their own political opinions (Wyness et al. 2004).

It would appear that, contrary to Arendt's (1959) concern of shedding public light on children, the primary issue with children being engaged in social justice action rests within the particular campaign and the manner in which children are engaged. Elshtain (1996) rejects Arendt's notion that children exist within isolated spheres, waiting to be led into one or another by the adults in their lives. She acknowledges that adults clearly can and do have an impact on children, but in a manner that merely influences—not controls—the pre-existing public, private, political, and social aspects of a child's life. Assuming complete innocence and naivety of children serves only to devalue a major facet of society and slow progress of social justice efforts. Wyness et al. (2004) note that "innocence equates to vulnerability, which legitimates children's political exclusion and adults' right to talk on behalf of children" (p. 85).

Kelly and Brooks (2009) describe the protection of childhood innocence as an oft-cited concern that prevents new teachers from engaging young children in social justice education. The authors argue against this notion that children are blank slates: "children's identities are culturally produced" which, "emphasizes that they are active in this process, not just passively taught ideas and values by adults" (Kelly & Brooks, 2009, p. 204). Furthermore, assuming innocence of a child creates concerns around engagement and participation. Wall and Dar (2011) explain: "The danger in assuming that every word the child speaks is unfiltered and unmediated by those around her and is the only way of getting at a child's perspective, complicates the understanding of what participation of children can really include" (p. 380).

Models of the Child

To develop a hypothesis of whether children should be involved in or educated for social justice, or to defend such a hypothesis, it is necessary to examine how the child is viewed by power-wielding adults in the public sphere (Wyness et al. 2004). The concept that children are benighted vessels, or blank slates is entrenched throughout society, often in the context of childhood innocence and through the several models of the child in relation to social justice (e.g., the universal child, the child as savior/victim, the colonized child, and the globalized child

as described by Steffler, 2009). Examining these models permits us to explore how adults view children in political contexts.

The universal child

Despite convincing arguments suggesting that children are political individuals with the capacity to be active citizens (Elshtain, 1996; Wall & Dar, 2011; Wyness et al. 2004), the universal child model is persistently used by literary, political, and cultural forces as a symbol to "erase national borders in order to teach and promote equality and social justice" (Steffler, 2009, p. 113). This model uses children's characteristics such as innocence, fragility, and universality to allow the consumer of the model to relate to the child. The universal child is frequently displayed as a victim and exploited to evoke empathy in campaigns to end famine, war, and poverty (Steffler, 2009, p. 113).

The child as saviour

In the model of child as saviour, the child is considered morally superior to adults, and is placed in a position to make a difference where adults have otherwise failed (Steffler, 2009). The child takes it upon him- or herself to "save society." While commendable, Steffler warns the danger "…is the valorization, entrenchment, and prolonging of the Canadian child as the enlightened donor, which requires, of course, the continued positioning of the "other" child as recipient" (p. 119).

Steffler (2009) reviews the concept of children saving children, citing Craig Kielburger as a prime Canadian example. As a 12-year-old child, Kielburger founded Free the Children. He was inspired to create the organization after learning about Pakistani child-labourer Iqbal Masih. The organization has received criticism for its "patronizing Christian overtones in the disturbing discourse of Masih as martyr/victim and Kielburger as savior/crusader" (p. 117). Furthermore, "the crusader empathizes with the labouring or needy victim, who tends to remain silent in his passive role as the "deserving" recipient of the activism" (p. 117).

This interpretation supports a notion that children living in third world conditions are blank slates for sympathetic children in western nations to fill with their own perceptions of what the child should be: "Children saving children entrenches the dependent and colonial roles of donor and recipient, saviour and victim, in those seen by society as carrying the most potential and bearing the most suffering" (Steffler, 2009, p. 118). Moreover, the donor or saviour is often rewarded or recognized for acting in a moral way (Steffler, 2009).

The colonized child

Intrinsically linked to the child as saviour model, is the colonized child model (McGillis & Khorana, 1997). Children, according to McGillis and Khorana (1997), are "the most colonized persons on the globe" (p. 7). In this model, children do not share the same opportunity to succeed and impose their political will due to being colonized by adults (Wall & Dar, 2011).

The globalized child

There is evidence of political and social influence from adults in Canadian children's literature that perpetuates this colonization of children. Steffler (2009) provides an example of a Canadian author, Deborah Ellis, who writes children's books with an international humanitarian theme. Ellis wrote fictional stories about children living in "desperate" situations in Malawi, Afghanistan, and Bolivia. While Ellis donated the proceeds to charities benefiting the children upon whom her stories are based, concerns have been raised over the appropriateness of the material. Steffler brought to light the potential for exploitation and misrepresentation of children's voices, and complacency toward social action:

> … the donations potentially free the author and reader from any discomfort or guilt that may arise as a result of consuming the miseries of the real children upon whom the fictional children are based.…The recognition Ellis has received through the many awards and honours bestowed on her and her work … reflects a self-congratulatory "good" feeling of a public that believes it can vicariously make the world a better place through reading (p. 110).… There are problems inherent in such assumptions of identification and empathy, the most disturbing being the ease with which the reader is supposed to negotiate and flatten difference (p. 112).

Rather than inspiring children to engage in action for social justice, these books and similar approaches to social justice education may only result in desensitization and apathetic reactions. Steffler (2009) argued that this is just one example in a recent trend to create the notion of the "globalized child" (p. 111) in children's literature. The use of children's books to push political agendas and "ideals of national citizenship" (Steffler, 2009, p. 111) is not a recently developed phenomenon. Steffler pointed to Canadian ideals of multiculturalism being widespread within children's literature in the 1970s. Carpenter (1996, as cited in Steffler, 2009) found the attempt to shape the nation through imposing an outside representation of minority populations futile:

> … the attempt to promote the ideal "multicultural" Canadian citizen through didactic children's literature naively assumes that children will enact what they read, are blank slates who passively receive culture because they have no culture of their own, and will automatically develop tolerance simply as a result of being informed (Carpenter 1996, cited in Steffler, 2009, p. 112).

Social Justice Education

Paulo Freire's text, Pedagogy of the Oppressed (1970, interpreted in Van Gorder, 2008, p. 21), suggests that education systems need to provide opportunities for children to create a "'world of possibilities' instead of serving the status quo by imprisoning naturally inquiring and curious minds in cells of silence and submission." Resulting from decades or even centuries of prejudicial social developments,

> social inequities are magnified by hegemonic classroom practices that reproduce and reinforce the cultural and educational traditions of white, middle-class communities at the expense of non-dominant cultures' educational traditions" (Dover, 2009, p. 507).

As described by Dover (2009), "teaching for social justice is the attempt by classroom teachers to use their position in the classroom to affect meaningful change within and despite current educational conditions and mandates" (p. 518). Dover lays out a conceptual framework for teachers for social justice. According to this framework, teachers must:

> (1) assume all students are participants in knowledge construction, have high expectations for students and themselves, and foster learning communities; (2) acknowledge, value, and build upon students' existing knowledge, interests, and cultural and linguistic resources; (3) teach specific skills and bridge gaps in students' learning; (4) work in reciprocal partnership with students' families and communities; (5) critique and employ multiple forms of assessment; and (6) explicitly teach about activism, power, and inequity in schools and society (p. 518).

Kelly and Brooks (2009) posit that education for social justice should be engaging and come from an anti-oppressive approach. It should be taught in a manner that enables teachers to "enact inclusive curricula and pedagogies while simultaneously adapting these to the cognitive, emotional, and political-evaluative capacities of their students" (p. 203). The authors state concerns over the use of the human relations approach to teach social justice. This approach manifests as anti-bullying interventions and teachable moments of tolerance or acceptance of difference. It presents issues such as racism as personal in nature instead of resulting from structural inequities. Rather than engaging students proactively in larger social change as active participants in citizenship, the human relations approach reactively addresses social justice concerns by taking a zero-tolerance approach to prejudicial attitudes, comments, or other behaviour without discussing thoughts and feelings from which they originated. This distinction between the human relations and anti-oppressive approaches, as described by Kelly and Brooks (2009), highlights the importance of defining social justice education in curriculum in order to have the greatest positive impact on children. Teachers have the duty to encourage students to critically explore their moral values and challenge their beliefs, even when in opposition to those of their parents (Kelly & Brooks, 2009).

In a small study (n=12) of pre-service teachers in western Canada, Kelly & Brooks (2009) found that new teachers base their understanding of children's capacity to understand political concepts on Piaget's concept of readiness. The reliance on this concept has

> … unnecessarily helped to restrict the equity-related work that teachers envision by implying that it is developmentally inappropriate for younger children (Kelly & Brooks, 2009, p. 204).

Some teachers in the cited study avoided "heavy" or "iffy" subjects (an example of an "iffy" subject was homosexuality), not only due to concerns of the students' capacity, but also due to potential negative feedback from parents. This aversion to social justice education is contrary to research that "indicates that most parents and students support socially just content and policy" (Dover, 2009, p. 515). There is little, if any, evidence to suggest that young children lack the capacity to understand and handle issues of social justice (Kelly & Brooks, 2009), yet teachers and other adults frequently use models of the child described earlier to discredit their capabilities (Wyness et al. 2004). In the same study, teachers

> … perhaps paradoxically … explained that deliberate teaching about respect might be easier in the early grades, because children's biases would be less "ingrained" (Kelly & Brooks, 2009, p. 213).

Similar to a child's right to direct political representation, it has also been argued that a child's right to education should not be misconstrued as a parental liberty right (Grover, 2007), meaning parents do not have the right to dictate the addition of prejudicial, or exclusion of socially just, curriculum.

Available research suggests, contrary to critics, that education for social justice builds on fundamental academic skills. In a literature review of the impact of education for social justice,

Dover (2009) found evidence of positive impacts in the areas of academia, behaviour and motivation, and attitudes. While Dover reported that the evidence available was commonly limited by small sample sizes, potentially confounding variables, and anecdotal in nature, he argued that education for social justice can be effectively integrated into standardized curricula. Furthermore, Dover argued that "comprehensive teaching for social justice is an integrated pedagogical, ideological, and curricular approach to teaching that includes rigorous content-based curriculum" and so, evidence found within studies of integrated social justice and other curriculum maintains its value.

Examining the impact of social justice education is not straightforward because definitions and teachers' understanding of social justice differ (Dover, 2009; Kelly & Brooks, 2009). Some scholars are concerned that the term "social justice education" has become trendy without a clear consensus on its definition or method of implementing it into curriculum (Kapustka, Howell, Clayton, & Thomas, 2009).

Children's Rights to Participation and Direct Representation

The United Nations Convention on the Rights of the Child (UNCRC) provides guidance to states around the participation rights of children. According to the UNCRC, children have the right to be heard, to freedom of expression, thought and assembly, privacy, and access to information (United Nations Convention on the Rights of the Child, 1989). The Convention does not provide sufficient grounds for the political inclusion of children (Wyness et al. 2004). Terms often used by states in relation to a child's capacity to understand and engage in politics and government are participation and citizenship. However, these terms may not be sufficient means for children to be active and engaged in social change. Wall and Dar (2011) suggest that both the terminology and the political systems that use them undermine the rights of children. Inherent in their argument is the belief that children need to have an increased role in the development of human rights policies through direct political power. The authors argue that children's rights go beyond those of the UNCRC to include direct political representation, in addition to participation and citizenship.

Participation through agency and voice does not equate to full participatory power (Wall & Dar, 2011; Wyness et al. 2004). Wall and Dar (2011) explain that children often lack the "political resources, experience, or capital to impose their own perspectives on political life" (p. 380) and are dependent on adults. This dependency should not exclude children from shaping policies around their rights, or reduce their participation to exploitative circumstances under which they are manipulated.

The concept of citizenship is commonly related to characteristics associated with adulthood, such as rationality, autonomy, and impartiality. Wall and Dar (2011) believe this concept to be somewhat accurate:

> The idea of political participation as the expression of independent agency or freedoms involves a level of adultism. It assumes a politically independent individual. The reality, however, is that both children and adults are better understood politically as operating within larger networks of social interdependence, in which they both act but also depend on support and inclusiveness (p. 381).

Citizenship is more accurately based on a notion of interdependence between adults and children, while also recognizing the uniquely lived experience of children (Wall & Dar, 2011).

Wyness et al. (2004) note that as part of being granted citizenship, children need to be recognized as having "full social status" (p. 84) with rights to self-determination, rather than simply as citizens-to-be.

In a democratic society, power is shared across all facets of society, and not limited to competition of autonomous individuals (Wall & Dar, 2011). The purpose of increasing the political power of children is to enhance their capacity to challenge governments through accurate and direct representation. Children are the largest group of citizens in society to wield no political power through direct representation (Wall & Dar, 2011). Not only do children have a right to be different than adults, but they also have the right to make a difference:

> A fully child-inclusive model of political representation will combine … concepts of interdependence and difference in what we call the right to make a political difference (Wall & Dar, 2011, p. 384).

Conclusion

There is an underlying assumption in society that "politics is 'adult' rather than child's play" (Milstein, 2010, p. 142). There is little evidence to support this notion, and strong arguments support the expansion of children's rights to include not only political participation and citizenship, but also direct representation (Wall & Dar, 2011). Children engaged in inherently political social justice campaigns do not exist solely in the political realm. They are still children. Their reliance on adult support does not suggest a need to exclude them from political processes: it suggests that adults need to support the active participation, citizenship, and representation of children through interdependent relationships (Wall & Dar, 2011; Wyness et al. 2004). The handful of examples of children campaigning for social justice provided in this article, and in Dover's (2009) review of the positive impact of social justice education, provide evidence of the capacity of children to exist as political individuals.

Among the examples found in the literature and the media of children engaging in social justice action, one theme that emerges is outspoken individuals and collectives from disadvantaged circumstances who speak out against maltreatment of themselves and others. Steffler (2009) emphasizes the importance of critically evaluating how children from advantaged circumstances engage in social justice action:

…until the extremely defensive border excluding and sanctifying childhood is broached and the figure of the child as redeemer and saviour critically probed, there will be little movement or change to the artificial constructions and exploitations of the universal/globalized child, who is refused the much needed translation from child to person and from concept to individual (p. 120).

Children and youth motivated to engage in social justice campaigns, or adults dedicated to supporting such efforts, should look for guidance toward models of social justice education, and be explicit about what definition they intend to follow. To that end, a consensus on the definition of the term "social justice education" needs to be agreed upon among scholars and educators. Once a consensus is reached, teachers need to be instructed to integrate it effectively into their curriculum. In response to critics of social justice engagement and education, society must continue to acknowledge the welfare and related rights of children, but adults need to uphold those rights in ways that do not interfere with the interests of children (Wyness et al. 2004).

Intuitively, one could conclude that teaching children to think critically to help shape a more just society would lead to a positive impact on children. An environment where children's opinions are valued and they are included through active participation, citizenship, and meaningful representation, will undoubtedly lead to positive outcomes. While research on the impact of social justice education is limited, the evidence that exists indicates positive effects on academics, behaviours and motivation, and attitudes of children that are exposed to it (Dover, 2009).

References

About Shannen. (2012). Retrieved from http://www.fncaringsociety.com/shannensdream/about-shannen.

Arendt, H. (1959). *Reflections on Little Rock*. Dissent, 6 (Winter), 45–56.

Benari, E. (2012, May 21). Children protest Syria massacre outside Russian embassy. *Israel National News*. Retrieved from http://www.israelnationalnews.com/News/News.aspx/156369#.T-idg45hBFA.

Bergmar, Magnus (2010). *Iqbal Masih*. Retrieved from http://worldschildrensprize.org/iqbal-masih.

Blackstock, C. (personal communication, June 2012).

Dover, G. (2009). Teaching for social justice and K–12 student outcomes: A conceptual framework and research review. *Equity & Excellence in Education*, 42(4), 506–524.

Elshtain, J. B. (1996). Commentary: Political children. *Childhood*, 3, 11–28.

Freire, P. (1970). *Pedagogy of the oppressed*. New York: The Continuum International Publishing Group Inc.

Grover, S. (2007). Children's right to be educated for tolerance: Minority rights and inclusion. *Education and the Law*, 19(1), 59–70.

Harper, S. (2008, June 11). *Statement of apology—To former students of Indian Residential Schools*. Ottawa, Canada. Retrieved from http://www.aadnc-aandc.gc.ca/eng/1100100015644.

Kapustka, K. M., Howell, P., Clayton, C., & Thomas, S. (2009). Social justice in teacher education: A qualitative content analysis of NCATE conceptual frameworks. *Equity & Excellence in Education*, 42(4), 489–505.

Kelly, D. M., & Brooks, M. (2009). How young is too young? Exploring beginning teachers' assumptions about young children and teaching for social justice. *Equity and Excellence in Education*, 42(2), 202–216.

McGillis, R., & Khorana, M. (1997). Introductory notes: Postcolonialism, children, and their literature. *ARIEL*, 28(1), 7–15.

Milstein, D. (2010). Politics is also "child's play." *Teaching and Teacher Education*, 26, 136–143.

Pearce, T. (2011, September 22). Taking kids to protests—Is it responsible? *Globe and Mail Blog*. Retrieved from http://www.theglobeandmail.com/life/the-hot-button/taking-kids-to-protests---is-it-irresponsible/article617674/.

Smith, T. (2012, February 15). Children ask Harper to 'have a heart' and improve education on reserves. *The Vancouver Sun*. Postmedia News.

Steffler, M. (2009). The production and use of the globalized child: Canadian literary and political contexts. *Jeunesse: Young People, Texts, Cultures*, 1(2), 109–125.

Traubman, T. (2005, November 28). Foreign workers' children protest at supreme court. *Haaretz*. Retrieved from http://www.haaretz.com/print-edition/news/foreign-workers-children-protest-at-supreme-court-1.175245

United Nations Convention on the Rights of the Child. (1989). Retrieved from http://www2.ohchr.org/english/law/pdf/crc.pdf.

Van Gorder, C. (2008). Paulo Freire's pedagogy for the children of the oppressors: Educating for social justice among the world's privileged. *The Journal of Pedagogy, Pluralism, & Practice,* 13, 1–30.

Wall, J., & Dar, A. (2011). Children's political representation: The right to make a difference. *International Journal of Children's Rights*, 19(2), 375–392.

Warmington, J. (2012a, May 8). Kids should be educated, not indoctrinated. *Toronto Sun*. Sun Media. Retrieved from http://www.torontosun.com/2012/05/08/kids-should-be-educated-not-indoctrinated.

Warmington, J. (2012b, May 8). What are they teaching our kids? *Sun News*. Retrieved from http://www.sunnewsnetwork.ca/sunnews/straighttalk/archives/2012/05/20120508-083920.html.

Wyness, M., Harrison, L., & Buchanan, I. (2004). Childhood, politics and ambiguity: Towards an agenda for children's political inclusion. *Sociology*, 38(1), 81–99.

First Peoples Child & Family Review
An Interdisciplinary Journal Honoring the Voices, Perspectives and Knowledges of First Peoples through Research, Critical Analyses, Stories, Standpoints and Media Reviews

Volume 7, Number 1, 2012, pp. 52-75

Inuit Youth Transitioning out of Residential Care: Obstacles to Re-integration and Challenges to Wellness

Sarah L. Fraser[a], Mélanie Vachon[a], Maria J. Arauz[b], Cécile Rousseau[c], and Laurence J. Kirmayer[c],

[a] Université du Québec à Montréal, Department of Psychologie, QC, Canada
[b] Université de Montréal, Department of Social and Preventative Medecine, QC, Canada
[b] McGill University, Division of Transcultural Psychiatry

Abstract

For youth under child welfare, transitioning out of residential care and reintegrating into their community can be a difficult process. This may be especially true for Inuit youth who, because they are away from their communities, cannot develop networks and relationships that would provide a secure place for their development as an adult and as a community member. The objectives of this study were to document how transition out of care is addressed in a residence specialized for Inuit youth under government care, and to explore, from the perspective of residential managers and staff, what factors facilitate or create obstacles to successful transition. Interviews were conducted to discuss the transition of 11 youth from residential placement back into communities. The criteria used by managers and staff to describe transitions mostly focused on the behaviours of the youth and the ability to create and implement a plan. A recurrent theme was the importance of continuity and connections with family, staff, and culture. Various measures were put into place around the current system of care in order to facilitate continuity and connections to respond to the cultural and personal needs of youth. To enhance the "cultural competence" of care, we suggest that: (i) criteria for successful and unsuccessful transitions be determined with youth, families, and communities; (ii) that Inuit representation in care be increased; and (iii) that measures be taken outside the current system of care to encourage shifts in power distribution.

Introduction

Aboriginal children are highly over-represented in the child welfare systems of Canada (Blackstock, Trocmé, & Bennett, 2004; Galley, 2010; Lavergne, Dufour, Trocmé & Larrivée, 2008; Office of the Auditor General, 2011; Trocmé, Knoke, & Blackstock, 2004). It is estimated that slightly less than a quarter of youth signalled to child welfare services (Blackstock, Trocmé, & Bennett, 2004; Lavergne, et al., 2008) and approximately 30 to 40 per cent of children placed in out-of-home care are of Aboriginal descent (Farris-Manning & Zandstra, 2003). In recent years, child welfare systems have been compared to the Indian Residential School system, with three times more Aboriginal children under governmental care today than during the most active period of the residential schools (Blackstock & Trocmé, 2005). Aboriginal children are twice as likely to be placed in out-of-home care, as compared to non-aboriginal children (Trocmé, Knoke, & Blackstock, 2004). The limited data on Inuit children suggest similar trends in overrepresentation within the

Corresponding author:
Sarah Fraser, CSSS de la Montagne (Parc Extension), 7085 rue Hutchison, Local 204.2; Tél: (514)358-7514;
sarah.fraser.1@ulaval.ca

system of care (Commission des droits de la personne et de la jeunesse, 2007; MacLaurin et al., 2005; Rae, 2011).

Despite this over-representation, to date there have been no studies of the experience of Inuit children in care or on the complex process of transitioning from care back to their communities. The present study was designed to explore how managerial and educational staff of an out-of-community residence for Inuit youth (aged 12-18) perceived the obstacles to reintegration for youth transitioning back to their communities. A secondary aim was to explore how these same managers and staff prepared youth for transition as a function of their perceptions and understandings of obstacles to reintegration and challenges to wellness.

Background

As Lafrance and Bastien (2007, p. 98) note, "[m]any are concerned that the child welfare experience may inadvertently parallel the colonial experience of residential schools and may have similar long-term negative ramifications for Aboriginal communities." Most often, the placement of Aboriginal children in care, including First Nations, Inuit, and Métis, is the result of a prolonged experience of economic poverty, parental neglect, lack of social support, and cultural oppression (Blackstock & Trocmé, 2005; Cunneen & Libesman, 2000; Galley, 2010; Trocmé, Knoke, & Blackstock, 2004).

Opinions on the impact of residential care on youth and their families in child welfare are divided. Some suggest that residential programs should not be viewed as last resort care but rather as preferential care for high-risk youth in need of high levels of structure (Anglin, 2004; Hillan, 2005; Lieberman, 2004; Lyons, Woltman, Martinovich, & Hancock, 2009). Some studies have observed various positive short-term gains among youth in residential programs, including reduced symptomology (Larzelere, et al., 2001; Lyons et al., 2009; Slot, Jagers, & Dangel, 1992), reduced delinquency (Kirgin, Braukmann, Atwater, & Wolf, 1982), and better general functioning (Blackman, Eustace & Chaudhury, 1991). However, some studies have found that these gains are short-lived (Bates, English, & Kouidon-Giles, 1997; Frensch & Cameron, 2002; Kirgin, Braukmann, Atwater, & Wolf, 1982; Slot, Jagers, & Dangel, 1992).

These studies have been conducted in the general population and use behavioural criteria to assess the impacts of care. Given the specific cultural, social, and economic reality of Aboriginal people in Canada, — which includes a long history of oppression with the removal of Aboriginal youth from families and communities — it is unclear how generalizable these results are to Aboriginal children generally, and Inuit in particular. Few, if any, impact studies have been performed among Aboriginal children in care. However, Lafrance and Bastien (2007) write: "we are learning from the stories gathered in our work that the outcomes of current child welfare interventions for many Aboriginal children have been abysmal, and in some respects, worse than those of the residential school system." What has been clearly established is the lack of culturally adapted services for Aboriginal youth in Canada (Office of the Auditor General, 2011) and for Inuit children specifically (Rae, 2011). As a result of this recognition, a priority recommendation was made by the Office of the Auditor General to determine the needs of youth and elaborate definitions of culturally appropriate care (Office of the Auditor General, 2011).

As noted in the Aboriginal Justice Commission, "The interpretation of child welfare legislation is an area where cross-cultural misunderstanding frequently occurs. Terms such as 'adequate care,' 'proper supervision' and 'unfit circumstances,' not to speak of 'in the best interests' and 'in

need of protection,' are vague and value-laden." The intercultural context is challenging, at best. An essential step in the process of providing culturally competent care is that practitioners and institutions familiarize themselves with their own cultures and practices as well as with the power structures within their systems of care (Cross, Bazron, Dennis, & Isaacs, 1989; Kalyanpur, 1998; Negi, Bender, Furman, Fowler, & Prickett, 2010; Pierce & Pierce, 1996). Culture is understood here as the lens, acquired in a developmental process of socialization, through which we view the world and our relationships. This lens influences how we think, feel, and act, and objectively and symbolically ties us to a collectivity (Bruner, 1993; Camilleri, 1989; Rocher, 1969). Cultural competence is defined as "the ability of systems to provide care to patients with divers values, beliefs and behaviors, including tailoring delivery to meet patients' social, cultural, and linguistic needs" (Betancourt et al., 2003).

Of course, how these broad ideas about culture are implemented in specific institutional practices remains unclear. A critical analysis of the institutional perceptions and actions in child welfare could allow Inuit people, who often have little power within the structures they must navigate, to become aware of the cultures that guide the development of programs and practices.

Transitioning out of care and reintegrating with the community can be a very difficult process, compromising any potential gains made in care. Studies among Euro-American and Canadian youth in care suggest that the most significant factors associated with maintained gains (i.e., higher self-esteem, reduction in severity of psychological symptoms, ability to adapt to the community environment) post discharge are family involvement (Hair, 2005; Stage, 1999), stability of post-placement, and after-care services (Burns, Hoagwood, & Mrazek, 1999; Frensch & Cameron, 2002). As noted, these findings cannot be automatically generalized to Inuit who face specific social, cultural, historical, and political realities. To our knowledge, no published studies to date have looked at the factors that facilitate transition among Inuit or other Aboriginal youth in care. Given that many features of Inuit youth and communities are distinctive, there is an urgent need for research in this area.

The present study examined the issues of cultural competence in transitioning out of residential care. The objectives were to unpack the views of managers and staff members in a new residential program related to the experience of Inuit youth transitioning out of residence, and to explore how these perceptions influenced the development of programs as related to transitioning home. This topic was a central concern to our Inuit research partners.

Method

The present study grew out of a regional initiative. In response to the large number of youth in care and the lack of human resources and infrastructure in a specific region of Canada, an out-of-community residential service was recently developed specifically for Inuit youth. The mandate of the residential staff was to "stabilize" youth in crisis. To do so, they were requested to develop and implement a "clinically" and "culturally" appropriate program. Neither of these terms was clearly described by the institution. The program was developed and run by non-Aboriginal professionals, with consultation from an Inuit individual hired as an educator by the residence as well as an Inuit Elder. Non-Aboriginal individuals made all decisions regarding preparation for transition as a function of their understanding of the reality of the youth they were working with.

The residence was in an urban centre, far from the youths' home communities. The health and social services of the communities serviced by the residence partnered with an urban-based

centre specialized in rehabilitative program development for youth and young adults presenting psycho-social, emotional, and/or behavioural difficulties. This centre contacted a small group of clinician-researchers specialized in cultural psychiatry/psychology, and more specifically in Aboriginal wellbeing, for assistance in program development and evaluation. The centre hired the first author of this paper (SF) as a research consultant three hours a week to participate in program development meetings, offer suggestions as to methods for quality assurance evaluation, and supervise the quality assurance process. SF was able to dedicate additional time to this project as a post-doctoral fellow under the supervision of senior authors (CR and LJK). The primary author developed methods of investigation with consultation from two Inuit individuals. All methods were then discussed with the three partners involved: the residential managers, the urban-based centre contracted for program development, and the regional health and social service institution. The administrators made final decisions as to what methods would be used.

Description of the program

The residence was developed in 2010 in order to fill a gap in specialized welfare services for Inuit adolescents 12-18 years of age. As a last resort placement, the residence mostly received youth with high-risk behaviours, alcohol and substance abuse, suicidal attempts, and/or violent behaviours. These behaviours evolved in various contexts of personal, family, and transgenerational trauma in contexts of structural violence, poverty, and inadequate housing (Rae, 2011).

Until 2010, provincial youth protection services in city centres were being used for youth for whom foster homes and in-community placement were not possible, generally due to the high-risk behaviours of youth and lack of placements in communities. They were therefore integrated into programs developed for the general population. A total of eight girls and eight boys could be received at a time within these facilities, and they stayed from three to twelve months before moving on to other services or returning home. Over the initial 14-month period of the program, a total of 23 youth stayed at the residence.

Over the initial 14-month period of the program, during which the internal quality assessment took place, almost all staff hired were non-Aboriginal; however, there were generally always two Inuit educators on staff. Due to their specific experiences and knowledge surrounding the reality, culture, and language of the youth, they were often asked to give advice to non-Aboriginal staff, to the program development committee, and to the researchers. As well, they led certain traditional activities, met youth individually when required, and translated or interpreted for youth and staff members when necessary.

Conceptual and methodological approach

An interactionist perspective was adopted as a conceptual framework. The interactionist perspective is based on the premise that human beings are best understood in an interactive relation to their environment (Blumer, 1969; Prus, 1996). This paradigm views social reality as constructed through personal experiences, culture, and interpersonal interactions. Interviews and observations therefore focused on the managers' and staff's perceptions, relationships, and experiences. The interactionist perspective has been widely used in intercultural contexts (Vachon, 2011) as well as in contexts of social marginalization (Demazière, 2011; Vachon, 2011).

Data Collection

Interviews. To explore transition out of care, the main sources of data were semi-structured and unstructured interviews with six staff members of the residence, including: (a) two managers, one for the boys' unit and one for the girls' unit; (b) the consultant from the regional health administration in charge of developing the residence; (c) an Inuit staff member; and (d) two therapists. Interviews were approximately 45 minutes in duration and involved a careful exploration of the context and process of transition for each case. They were audio-recorded, transcribed, and analyzed using NVivo (2010). Interviews were conducted with youth on various topics, but they were not interviewed concerning their transition out of care because the scheduling of this was unknown at the time of the interview and follow-up after return to the community could not be arranged for logistical reasons.

Individual logs. Logs were recorded by staff members for each youth at every shift of the day (three times a day) for clinical purposes. Staff recorded the youth's general mood during the shift, special incidents, relationships with peers and staff, contact with parents, and any clinical information pertinent to follow-up.

Observation. Participant observation was used to gather additional information on the transition process of youth. Observation also allowed for better understanding of the social meanings, rules, habits, functioning, and rituals at the residence. This involved many hours of participation in regular activities on residence floors with youth and staff. The main researcher and two research assistants took part in routine activities with the youth (i.e., sewing, girl-talk group, activity centre, smoking breaks) as well as team meetings. Detailed records of observations, decisions, and reflections regarding youth's experience of placement, clinical practices, and organization of care were kept throughout the evaluation process in the form of reflection diaries and video-recorded interviews among research assistants. The main researcher also took part in weekly program development meetings over a four-month period.

Ethical Considerations

Data were collected as part of a quality assurance process mandated by the Regional Health and Social Service institution in agreement with the Ministry of Health and Social Services at the time that funds were made available for the development of the residence. Accordingly, the hospital IRB, the institutions, and the communities agreed that no formal consent from participants was needed.

The first author conducted data analysis. The data was kept in the possession of the lead researchers for logistical reasons. However, they remained under the ownership and control of the health and social service institution of the communities. An Inuit health board governs this institution.

Approval to further analyze and publish the results was obtained from the health board as well as the Institutional Review Board of the research hospital to which the primary researcher was affiliated as a postdoctoral fellow. In preparing this report, references to clients or other clinical material has been altered to protect participant confidentiality.

Prior to the dissemination of any results, the lead researchers requested permission from the health and social service institution. All material was then presented to Inuit representatives of the major organizations and institutions of the region.

Data Analysis

We collated data from interviews, reflections from observations, and relevant material from the individual logs. Using NVivo software, qualitative analyses were conducted by a research assistant and two researchers. Data coding followed thematic analysis (Braun & Clarke, 2006). In the initial phase of this method, interviews, reflective notes, observation notes, and logs were transcribed, read by the research assistants, and re-read by one of the researchers. The lead authors and the research assistants highlighted thoughts and extracts, allowing the emergence of new insights and interpretations. Second, the two lead authors generated initial codes by organizing the material according to the research objectives and coding data that appeared to offer elements relevant to understanding these questions. At this step, multiple in-depth discussions took place among team members. The third phase involved grouping specific codes under more general themes to document facilitators and obstacles to post-treatment transition. During the fourth step, themes and codes were verified and categorized as a function of emerging themes as discussed in phase three. Fifth, we defined all categories (both codes and themes), and linked emerging themes with significant extracts. The sixth step consisted of relating emerging themes with the literature on the subject. Throughout the process of coding and analysis, methodological reflections and decisions were shared and discussed among research assistants and the first two co-authors (SF & MV) to improve the consistency of interpretations and findings (Malterud, 2001).

Results

Criteria used to discuss transition

No *a priori* criteria were offered to managers and staff members to discuss transitions. Few explicit criteria were used in the interviews. Transition was generally discussed in broad terms, with little detail about what constituted success or failure. In general, managers appeared to base their recommendations of when transition should take place on their assessment of the youth's feelings about transition, the youth's behaviours, the belief that the youth is capable of maintaining the behaviours over time and in a different context, the availability of a place to stay, the family's readiness to offer a safe and healthy environment for the youth and a general consensus between social workers, the youth, the residential staff and family members that youth was "ready."

> "He [name] was supposed to have another three months with us, but he had done so well that we felt that it was more of a punishment to make him stay, rather than send him back [to the community] and try and fix things for him in the family."
>
> — Manager interview

> "So basically it is based on her [youth's] behaviour in the unit, for the most part, which has been acceptable. If that's the criteria you want to use, then yeah, she should go [home]. And if her parents are ready to have her, then she should go. That was basically in a very short period of time. "
>
> — Manager interview

On various occasions it was mentioned that, despite progress in a youth's behaviour in residence, managers had concerns about the youth's ability to maintain such behaviours in a different context.

> "Based on the progress and the behaviour here [in residence], that would indicate that it's time for her to go back [to her community]. And we were saying, OK yeah, but it's been a short period of time and it does not mean that she'll be able to transfer to the community. And so we said, OK let's give her the opportunity to try.
>
> — Manager interview

> "I think one of the problems when you work in rehabilitation is that you have to be very careful because the moment somebody starts to make progress then it's OK; it's time for them to go. But often times when they start to make progress, it's the time that you should hold on to more, to secure, and to be sure. 'Cause oftentimes: Ah! Progress! We move along! And it's too early and they fail."
>
> — Manager interview

Managers therefore felt that behaviours and the ability to change within a specific context of care were not sufficient to ensure a smooth reintegration into families and communities. Transitions were viewed positively when the positive behaviours observed in residence were maintained at least partially following their return to the communities. Considering the difficult family and community contexts that youth often returned to, and reflecting their professional training and background, managers and staff adopted a harm reduction philosophy when assessing the "success" of transition. Being able to somewhat resist peer pressure to engage in harmful behaviours, and remaining "functional" by going to school, or maintaining a job despite occasionally returning to harmful behaviours, were viewed as positive adaptations to the community.

> Interviewer: "And good [i.e., ready for transition] for you would be that. . ?"
>
> Interviewee: "Well good is that one of the things we know, theoretically and practically, when it comes to substance abuse and severe addictions, to get people to break that habit and stop is very difficult. So what we focus on is harm reduction. So if you're gonna use and you're sure that you're able to use it in a way where you're not putting your health at risk, where it doesn't interfere with your ability to work and hold a job, where it's not to an extent of interfering with your parental relationships, those kinds of things. So I mean in that sense. So if she is, it has reduced to a point in this stage, where it's not being disrupted, as we would think, so she is still in line."
>
> — Manager interview

> Interviewee: "Ah, what does she do when she's in difficulty? Ah, she can self-mutilate; self-harm. Umm, she also draws, self-isolates. What's important is she has at least concretely one or two people that she can talk to when she's feeling that way."
>
> Interviewer: "And does she contact them? "
>
> Interviewee: "She does."
>
> — Manager interview

> "I know her primary worker continues to speak to her grandmother and mother and they say things are going well; they're pleased with her behaviour. But all of this is relative. As I say, she was in jail for fighting and drinking. And so when they say that they're pleased with her behaviour it's relative. I mean, it's only half [inaudible] since she's been back, this was nothing like it was before. It was something that happened frequently, so yeah. . . ."
>
> — Manager interview

Finally, when managers and staff had time to establish and implement a plan for transition, this in itself was viewed as a success. Plans, which will be discussed in further detail later, mostly included creating job opportunities, and linking the youth with a specialized service or a resource person. On the other hand, when a plan was implemented or if the youth had to be placed under youth protection again or incarcerated, the transition was viewed negatively.

> Interviewee: "Yep. She'd already tried to go [to the community] before. She had tried to leave to go to substance abuse, a treatment facility, and didn't work so was back [a few days] later. Also, before coming to us, she had been in [urban-based youth protection for general population], she had been in the [group home] and she's gone home from there and it hasn't worked and she'd come back. "
>
> Interviewer: "So you had the concern that this time it would actually work out? "
>
> Interviewee: "No, I'm saying it was quite different. I'm saying this time we all felt more confident; that it did work out this time. . . ."
>
> — Manager interview
>
> "Now that's the one you're going to see where the problems are. . . . How much work we had done here and then what he finished in. . . . He's now in jail."
>
> — Manager interview
>
> Interviewee: "I mean, she's managing it. I mean, you know, she has her moments, but she's been able to stay there. Good for her."
>
> Interviewer: "In what sense do you mean managing right now? "
>
> Interviewee: "I mean she's in [the community]. She's managing to stay there. She's managing to stay in school, even though there are days that she misses, those kinds of things. She often calls back and tells the girls how much she misses here and she wants to come back. But she still plans to stay."
>
> — Manager interview

Youths' desire and ability to remain within the community over time were implicit criteria to what was perceived as a positive reintegration. Transition was rarely viewed frankly as a "success" or "failure" but rather as a complex process in which youth oscillated.

Elements that facilitate a positive transition

According to the perspective of staff, the main factors that seemed to facilitate transition were various forms of connections to others, to the community, and to culture, as well as continuity of relationships with family during their residential stay and to residence staff following their transition back to their community.

Contact with family and community members throughout youths' stay was perceived as a powerful motivator for youth, encouraging engagement in the program. For example, they reported that youth who had better family and community connections would express their desire to stop using drugs and alcohol, would respect the residence rules in order to please their family and increase the likelihood of returning home quickly. When managers and staff had the impression that family members were actively involved in the care and transition phase, they

felt that this period was easier for youth who were more confident in their ability to adapt to the various changes they experienced, and motivation was markedly increased.

> "Certainly having her aunt who stood by her and continues to stand by her, who is not giving up on her; a huge source of resiliency for her."
>
> — Staff interview

In a case where a youth was placed in care following multiple instances of acting out (not attending school, using drugs and alcohol, getting into fights), the manager noted the importance of developing a trusting relationship between this youth and her primary care-taker, her grandmother, in order to allow for new and positive experiences to emerge between them:

> "I think the transition worked, because she wanted to be different. I think it worked because she was able to behave in ways that build up trust with her grandmother.
>
> So her grand-mother had a little confidence in her and she had more confidence in her grandmother because she was beginning to talk to her, and be more supportive."
>
> — Manager interview

Staff members observed that contact between parents and youth was often difficult for youth. Due to the fact that this residential placement was a last resort, most youth came from families with long histories of psychosocial problems. Therefore, despite their desire to spend time with family members in the residence, staff felt that parental contact was, at times, associated with distress.

> Client talked to me about how her [family] was always letting her down and how she feels like she is going to explode when she talks to [family]. She vented how she feels left out when her [family] talks about other family members. . . . Client has requested that we do not share info on her with her mom and that she doesn't want to talk to her anymore.
>
> — Individual log

Managers and staff felt that continuity in care provided by the residence and connections between youth and residential staff were important motivators for youth who connected with their primary worker.

> "I think it [that what helped the youth's transition] would be the relationship she had with her worker. I think the primary worker really pushed her to look at some of the behaviours. The primary worker really, really pushed her; really did a lot of individual one-on-one work counselling sessions with her."
>
> — Manager interview

Managers report that following youths' transition out of care, all the youth have maintained contact with educators from the residence. Some youth called to give news while others made contact when needing to talk or ask advice.

Managers and staff felt that youth established continuity and connection not only with specific resource people in their environment but also with their culture. Managers and staff considered it positive when youth took part in traditional activities in residence, such as sewing, carving, and traditional games, or when they developed skills and practiced elements of their culture on a daily

basis within their communities. It was also felt that practicing traditional activities at the residence allowed youth to symbolically maintain connections with family members and cultural identity.

> "She participated here in throat-singing, she's got skills. And what she's got going for her as well is that both mother and grandmother are throat-singers. They are well known for their singing I mean, so that's something that she can connect up with, with her family."
>
> — Manager interview

> "She's still finding activities to do like traditional sewing because that's one of the things we stressed that she did here that would be important if they hook her up in the community. "
>
> — Manager interview

Obstacles to reintegration

Among the 11 youth who had left care prior to the interviews with staff, all returned to close or extended family in their home communities. From post-care contacts with youth managers, it was reported that three of these individuals were incarcerated in the months following transition and two returned to the residence in the six months following their transition home. Some apparently had felt intense emotional difficulties soon after returning to their communities, while others returned to old habits, such as drinking or not attending school, but with moderation and fewer repercussions on their daily lives.

> "The fact that if she's doing it [drinking], she's not doing it to a certain extent that it is disrupting her and putting her in contact with the law and those kinds of things. So that's good. "
>
> — Manager interview

> Interviewee: "We certainly had instances where we got a call that she's gone to the hospital, that she tried to kill herself or we got a call that there was a concern she might freeze to death because she had drank so much she would be laying outside, and somebody came by and discovered her and helped her. Yep. "
>
> Interviewer: "So she still has some difficulties. . . ."
>
> Interviewee: "Has some difficulties. Will always have some difficulties and it's continuously trying to be alive and get something out of life. "
>
> — Manager interview

> "Well, I know that. . . . She actually called us last week to say she just got in jail for drinking and fighting. . . . So that's not uncommon. That's not uncommon for our girls and boys, when they go back [to their community] to drink and to fight. Not uncommon. "
>
> — Manager interview

According to staff, youth had difficulty adopting new life-styles in old contexts. Managers and staff identified many factors as potential obstacles to what they perceived as being a healthy reintegration: returning to difficult home environments; lack of continuity in services and relationships; anxiety and ambivalence related to transition. Finally, for some youth — particularly those with criminal status or complications in the decision-making process — an important obstacle for their transition and reintegration was the lack of time for preparation.

According to staff, the greatest obstacle to reintegration was having to return to contexts that often had not changed, and thus presented the same unhealthy environments from which the youth was taken in the first place. During their reintegration back to their communities, youth had to deal with alcohol and substance abuse among friends and peers, violence and neglect, lack of social and health resources, and lack of opportunities and/or activities, causing intense feelings of boredom.

> "But all the girls will tell you that there's nothing to do, except to hang out at the co-op with friends, to smoke, to drink, to do drugs. There's nothing else to do."
>
> — Staff interview
>
> "He went back to [community name] and he was living with [family member]. He then didn't want to go to his house because his [family member] was drinking, and he didn't want staff to see that. . . . So, it was a setup. You're talking about a kid with really heavy substance abuse issues and then with no preparation, just walk right back to that thing. . . ."
>
> — Manager interview
>
> Staff described how these community contexts revived unhealthy dynamics and coping mechanisms, such as drinking, using drugs, and taking part in delinquent activities. With limited personal and community resources, some youth adopted available strategies to "numb the pain."
>
> Interviewer: "Why would they go back to drinking?
>
> Participant: "To drugs and alcohol and whatever? Because it's there. Most of the time it's friends that have stuff for you, it's already there and that is where they get away from their problems."
>
> — Staff interview

According to staff, different forms of discontinuity in care and relationships were major obstacles to reintegration. They described first the lack of specialized care required for drug and alcohol addictions and psycho-emotional difficulties. The loss of specific resource people was also noted as a major obstacle to "successful" transitions. This included the frequent turnover of community-based workers.

> "The [social] worker he had, just left and had given it [the case] to another [social] worker. By the time I made sure of his transition plan, she said she was no longer the worker. So then it was another worker; and then, by that time, it was November. And he was coming home in November."
>
> — Manager interview

In our observations on residential grounds, and talking to youth, we noted they often developed a strong attachment not only to the staff and other youth but also to the residence. Youth in care gave each other special titles such as soul-mate, sister, or brother. It was not rare that youth spoke of the residence as being their "fake home." Girls spontaneously cleaned open spaces to make them feel more "cozy." Despite common frustrations related to placement, and the repeatedly expressed desire to return to the community, youth reported feeling safe within the residence. Transitioning back to their communities often meant losing these relationships and the feeling of comfort; these losses were experienced against the backdrop of other personal loses endured throughout their lives.

Discontinuity in care was a particular problem for youth who age out of care when they reached the age of majority and were no longer eligible for services, as well as for youth who were classified as young offenders. In such cases, youth benefited from few, if any, services within their communities.

> "And when the kids are not [under] youth protection, the worker's involvement in the community is very minimal. They just want to make sure that they have done what they needed to do. So there's no chance of going home for a visit before the measures run out because it's young offenders. So it's not like when its two weeks before going back or a month, we can plan to start sending him up. We just can't do that."
>
> — Manager interview

In this excerpt, the manager discusses the complexities surrounding the planning of care for youth under the Youth Criminal Justice Act. In such cases, youth must strictly abide by their court sentence, which generally involves placement for a specified period of time. During this time, trial visits to help youth create networks in the community and re-experience life at home are not possible. As well, child welfare services have mandates with clients until they reach a specific age. In this particular region, the mandate ends at the age of majority, after which funds are not available for follow-up and care provided within communities is minimal. Youth were very aware of this system and some expressed indifference with regard to available services, looking forward to acquiring status as independent "adults," while others felt anxiety when faced with a lack of services. Managers felt that this legal status was an important impediment to change among youth, and dramatically reduced the time and resources available to prepare for reintegration.

> Interviewer: "And maybe because they're older that it didn't work. . . ."
>
> Participant: "Exactly. Not nearly enough time to try to impact the kind of severe delinquency that they were involved in."
>
> Interviewer: "Do you think that if they stayed longer here, it would've changed?
>
> Participant: Change is a big word. I think I'm certain it would have certainly had an impact on their behaviours. . . . And also, they don't engage because there's this mystical magical date of when I turn 18 and free and I'm an adult and you can't tell me anything."
>
> — Manager interview

Change in structure and discipline from residential settings to home was perceived as being a major form of discontinuity. Gains made in care were viewed as resulting from structure and discipline, continual reinforcement, and consistency in the consequences given to youth, and it was felt that such structure and consistency was often lacking within the homes of these youth.

> Interviewer: "Is it good for them to have a tight schedule with lots of activities?
>
> Interviewee: It is but at the same time when they leave here they are going to be in culture shock. Because it's so different from what they live up there, so it's as if it helps them to feel better but it doesn't prepare them for reality.
>
> It [transition] is really hard for them because I think that deep down inside they do want to change, they want to keep this strict lifestyle and just someone to care about them. . . . So it's hard for them to adapt to [pause] freedom."
>
> — Staff interview

Staff and managers also discussed their perception of youth's anxiety when facing transition. According to interviewees, youth were conscious of the obstacles they would face when returning home.

> "Oh, lots of, lots of anxiety. Lots of, lots of sadness. Lots of concerns about: am I going to, am I going to be able to do this? You know, so. . . . She had no confidence about doing it. So, the anxiety was not as nearly high as it had been the other times. And at other times she'd actually changed her mind and didn't go."
>
> — Manager interview

> [Name of youth] is telling us: "I'm scared, and I'm scared because I know when I go, I'm gonna be bored, because the school there is boring, it's nothing like here. There's nothing to do. And so all my friends, they drink, they smoke, they use drugs, so it's going to be very difficult for me. How am I going to be able to say no and not do it?"
>
> — Manager interview

Peer pressure, bullying, and ostracism were seen as major impediments to reintegration. Our time spent with youth allowed us to hear them describe how boredom and bullying within the communities is a major stressor in their daily lives.

> "He was 17 and they didn't want him back in the community. So they figured, we'll kinda keep him there until he's 18."
>
> — Manager interview

> "She burned so many bridges, I mean, both in the trust of so many people, because of the violence, because of the stealing, because of the drugs. I mean, people were just very reluctant to have her back in the community."
>
> — Manager interview

Being placed away from the community also opened the door to various post-discharge options with regard to living arrangements. Youth got to see the city and be in contact with family members or friends living in the city. These experiences broadened the imagination of youth who aged out of care, but sometimes created anxiety and confusion.

> "He didn't know where he was going. He would ask me: where am I going? What's going on? Who is going to take me? So I suggested that we meet, him, myself and his social worker, all together. We went over the options, we looked at what was viable, what made sense and all the anxiety went down, all of the sudden he was not angry and didn't have an attitude."
>
> — Staff interview

A final obstacle to a positive transition, as perceived by managers and staff, was the lack of time available for preparation. Decisions on transition sometimes depended on judicial decisions or other factors that derailed systematic planning and preparation. On some occasions, youth found out about having to transition back home only weeks or even days prior to the actual event. Following a scheduled court appearance, youth were told whether their stay in the residence would continue or a return home was granted. Youth might then only have time to return to the residence to pack their bags. On the other hand, they might have a prolonged period of anticipation over the possibility of going home and, when told they must stay longer, returned to the residence frustrated and disappointed.

> "I don't know if it was a last minute thing, but we were definitely preparing him for an extra stay. We were looking at circus schools. He was very athletic. He liked to do like acrobats. So we were trying to look for a gymnastics or circus school for him to attend. So we were trying to get the positive of staying with us, so that he wouldn't get down. And then the day before the court, she (the social worker) said: no, we changed the recommendation, he's coming back."
>
> — Manager interview

> " Unfortunately advance notice [of when youth will be transitioning out of care] is not a common thing. . . . when they do have the time, when they are given a month, two months, three months advance notice, everyone is able to run around and build support for them and try to get them back to school, get them ready for a job, get them to meet the people to support them in their community, you know, I can have a proper termination where we work on focusing on the future and their strengths and get them kind of ready for that emotional departure from everyone."
>
> — Staff interview

Structural elements and program development

The residential program and policies developed and evolved throughout the period of the internal quality assessment. Here we describe the structural elements inherent to the youth care services of this region as well as the program elements developed to ease the transition of youth as a function of the manager's and the staff's perception of the youth's needs and experiences.

The official procedure for decision-making was hierarchically structured and dependent on the Act under which the youth was placed (see Table 1, p. 66). The intricate relationships and dynamics between the various individuals involved in the youth's life create important differences in who may influence the decision process. Managers provided examples of who is involved and how the decision process might fluctuate from case to case and could include family members, social workers, judges, educators, managers, therapists, and the youth themselves. When discussing the transition of a particular youth who was at the residence under voluntary measures, the manager explained that they encouraged the youth to stay due to the perception that his family context was not ideal at the moment of transitioning.

> "I think we did it in collaboration with DYP [Department of Youth Protection] they based it a lot on our feedback. . . . We actually encouraged him to stay on. . . . But he decided he would rather go back than stay here longer."
>
> — Manager interview

In a second case, the manager explained how the social worker within the community established a plan in communication with family members, lawyers, and the residence, but could repeatedly modify the plan as a function of the family circumstances, perceptions of the youth's behaviour, or other unknown reasons. These changes make it difficult to develop a transition plan.

> "His planning was done in conjunction with the [social] worker. Now it's a little more difficult because the decisions were getting changed very often. So at one point the social worker was asking for three extra months and then she wasn't and then she was asking for it again. Like we were preparing him for an extra stay, and the day before she told me he was going home."
>
> — Manager interview

Table 1: Types of placements

	Social Services Act	Youth Protection Act	Criminal Justice Act
Reasons for placement	Voluntary placement	Security and development are compromised	Criminal activities
Responsibility for decision making	Youth protection	Youth protection court	YCJA court
Interactions in decision	Social work will interact with residential workers and other professionals	DYP social workers make recommendations, other professionals and workers may offer recommendations to the social worker	Rehabilitative services, therapists and other professionals working with the youth may provide the court with recommendations

Once the social worker from youth protection services decided that a youth would transition out of care, the residential managers adopted a number of practices and activities to aid youth in their reintegration. Managers were concerned with ensuring that youth leave care with a safety plan that included identifying specific resource people whom the youth trusted. Planning also included developing an education and work plan when appropriate. The interventions for preparing youth to return to their communities were tailored to youth's specific needs as determined by the managers and social worker.

This planning required communication between the residence social worker and resources within communities (employers, teachers, family, and other potential resources). Educators accompanied youth on trial visits to their community to help youth reintegrate at their own pace and to aid them in developing trusting relationships with the identified resources. As a manager noted,

> "[There are] lots of telephone planning conversations; going [to the community] to the family; the primary worker, going up and meeting with youth and the worker; finding a resource in the community"
>
> "I think she must've gone like three or four times. Three, four days at this time; a week at this time, as an integration back into the family home and into the community."
>
> In order to create a sense of continuity in relationships and connection with the residence, managers and staff members organized "goodbye" rituals for youth who were about to leave. Youth were offered a departure gift. On the boys' section of the residence, they all chose a piece of jewellery, which became a sign of belonging and connection to the group.
>
> "The boys have all chosen jewellery and a bracelet. That comes from one of our staff who wears a big thick choker and thick bracelets in stainless steel, and I think the guys kind'a look at that as cool, so that became, once one picked that as a gift, everybody else did it too."
>
> — Manager interview

A supper was organized for the departing youth, either with the whole group or just with their primary worker, according to the youth's request. Youth who left the residence often returned to their communities with residential staff. Staff members remained in the community for a few days as the youth began to reintegrate. During this period staff would meet with the family, help youth connect with community services, and offer support when needed. Following their transition home, youth could communicate with staff members at the residence at any time. For two youth who did not call the residence in the weeks following their transition, staff made contact with them for follow-up.

Apart from the program elements specific to the transition period, managers developed a program and policies that they felt would help youth both in care and after care as a function of the perceptions of facilitators and obstacles noted above.

This residential program was developed on the model of the Circle of Courage (Brendtro, Brokenleg, & Van Bockern, 1990). This empowerment approach was based on Native philosophies of child care and attempts to foster courage by developing four abilities and values among youth: belonging, generosity, mastery, and independence (Brendtro, Brokenleg, & Van Bockern, 1990). Educators received a three-day training session on how to implement these values on a daily basis. The concepts were used concretely in specific activities. For example, during girl team meetings, staff would give specific girls a star on *the wall of stars* if educators felt that youth had displayed one of the four values fostered in the circle of courage. Aside from these concrete examples of the incorporation of these values in activities, it was unclear how the values were understood by the educators and integrated in their interactions with youth and within the general program.

Specific traditional activities were also included in the program, such as sewing, carving, storytelling, throat signing, Inuit games, as well as traditional meals. There was a hope that these activities would help youth gain insight into their behaviours and reconnect with their culture and family.

> "Hopefully, the work that [cultural broker/educator] and people have been doing for 'girl talk' and the 'circle of courage,' — that's what they're doing — [learning to be] able to say no and being able to walk away [from trouble]. Hopefully it's gonna work. The reality is that Wednesday you might fail and not be able to say no and walk away. But hey, if you can do it Monday, Tuesday, Thursday, Friday, good for you. "
>
> — Manager interview

Youth could communicate with family members on a daily basis, and staff contacted families and social workers regularly to maintain communication. Youth had daily computer time scheduled to enhance contact between friends and family. A third unit was opened to allow family members to visit their children while in residence. During these visits, which would normally last two to four days, youth could stay with their family in this separate unit. Also, if managers and staff members felt that the transition period may be particularly difficult for the youth and that there was a possibility that it would not succeed on a first trial, rooms were left vacant for a few weeks to provide youth the opportunity to return to residence.

> "See, even when he left, it wasn't 'this is final,' we had made like a first plan where he went up for two weeks and we saw how that went and if it went well, then before [month] he would go up. But we still had . . . we left his bed open until [month], just in case. . . . And he knew that. Like, you know: 'This is a test. You're going up. You did well last time so if you can sort of keep your end of the bargain, then you'll stay in the community, and if not, you have to come back and spend some more time with us.' "

— Manager interview

In cases where youth requested or required, as determined by the community social worker, to return to the residence once these few "transition" weeks were over, they were placed on a waiting list and returned for a second stay.

Managers and staff's interactions with youth influenced not only the program development on a more permanent basis but also the attention and resources mobilized on a more personal basis. Spending such a long period with the youth and witnessing their distress can be emotionally difficult for staff members, especially during times of transition. In this example, the manager discussed his feelings about the transition of one of the youth who has had repeated suicidal attempts in the past:

Interviewer: "And how did you personally experience [her] departure?"

Interviewee: (*Silence*) "Anxiety, fear. . . . Because I'm still not sure how long she'll live."

— Manager interview

When staff and managers felt that youth were anxious about returning home, this anxiety sometimes mobilized special attention and care from staff members, who showed a strong desire and motivation to offer care pre- and post transition.

"She had asked me: 'When I leave from here there is a possibility for me to continue seeing you?' and I said 'Yeah, we can work something out,' and we spoke about that, and developed a plan if she is [in the city] that she could come see me. And if she is [in the community] maybe we can talk on the phone. Maybe we can speak to her social worker."

— Staff interview

Discussion

The objective of this exploratory study was to examine the obstacles and facilitators for Inuit youth when transitioning from residential care back to their home communities, as perceived and understood by the managers and staff members involved in program development and service provision. Five of the six individuals interviewed in this study were non-Aboriginal. Moreover, all individual logs were written by non-Aboriginal staff members. The researchers and research assistants were also non-Aboriginal. The results therefore primarily reflect the experiences of non-Aboriginal social service workers. It is important to note, however, that the results were shared and discussed with an Inuit educator/cultural broker and an Inuit Elder who gave feedback that was integrated into the final interpretation.

Although the perspectives of the youth, their families, and communities were not assessed, the views of professional staff involved in service development and provision are important for understanding the values and orientation toward culture and social services that guide program development in residential care and shape what is viewed as being "culturally competent" care when planning the transition of youth back to their communities.

In assessing whether youth were ready to transition back to their communities, the major questions managers had were: 1) Have their problematic behaviours changed? 2) Are the youth likely to maintain these behaviours in the community? And 3) How can we plan the transition? Elements of a positive transitions included going to school, keeping a job, having structure within

the family environment, less suicidal ideation and attempts, as well as a reduction of alcohol and drug use. These criteria are consistent with the professional and institutional mandate of "stabilizing" youth presenting high-risk behaviours.

Obstacles to transition

The obstacles discussed by interviewees were mostly forms of discontinuity within the structural system, including disruption in care after the age of majority, and certain last-minute legal decisions concerning the moment at which the transition back to communities will take place.

In this study, of the five youth who attained the age of majority at the time they left care, three were incarcerated in the months following. Longitudinal and retrospective studies assessing outcome of youth leaving care at the age of majority suggest high rates of incarceration, homelessness, and psychiatric illness (Cauce & Morgan, 1994; Fall & Berg, 1996; Fitzgerald, 1995; Lindsey, Kurtz, Jarvis, Williams, & Nackerud, 2000; Maclean, Embry, & Cauce, 1999). Having services abruptly withdrawn has an impact on youths' ability to adjust to independent living (Mann-Feder & White, 2003; Thompson, 1996).

A second major category of obstacles was described as unstructured or challenging post-care environments, including exposure to alcohol and substance abuse in families and/or communities, boredom, and lack of opportunities. The literature suggests that the stability and quality of placement following discharge greatly influence a youth's ability to maintain any gains made during their residential stay (Lewis, 1982; Wells, Wyatt, & Hobfoll, 1991). Boredom and bullying within communities may be important social determinants of health, and have been identified as targets for mental health prevention and intervention programs for Aboriginal youth (Fortune, Sinclair & Hawton, 2008; Kirmayer, 1994; Kirmayer et al. 2009; Mohajer, Bessarab, & Earnest, 2009; Stevenson & Ellsworth, 2003).

Facilitators of transition

Most of the strategies put into place by managers and staff to facilitate transition remained within the existing structure of care. Strategies to facilitate transition by strengthening continuity of care included encouraging youth to stay longer in care, accompanying youth to their community to help them create new social, educational, and job networks, creating rituals before departure, offering symbolic gifts, and offering post-care support via telephone. Continuity with family was supported by looking for extended family members who could foster the youth post-care, and creating opportunities for communication between youth and the community. To provide cultural continuity, managers and staff strived to incorporate "traditional activities" into the program.

Concerning continuity with family, some authors have suggested that greater contact during placement increases the likelihood of returning home following placement (Cantos, Gries & Slis, 1997) and maintaining behavioural and psychological gains made during placement (Hair, 2005; Stage, 1999). There is very little literature assessing the involvement of parents of Aboriginal youth in care. However, work by Delfabbro, Barber, and Cooper (2002) found that in their sample of Australian youth in care, Aboriginal parents tended to have less contact with their children, geographical distance being a major impediment to parental contact during placement. Many Canadian First Nation communities and most Inuit communities are remote and isolated. Any

services provided in urban areas may therefore be difficult to access, due to both financial and logistical constraints, and could potentially decrease the likelihood that youth will maintain any positive behavioural changes.

Program development and culturally competent care

Betancourt and colleagues (2003) defined cultural competence as the ability to provide care that meets the social, cultural, and linguistic needs of individuals and groups. Our data raise three basic questions about the application of this notion of cultural competence in residential settings for Aboriginal youth.

First, who assesses the needs to be met by culturally competent care? Data gathered from interviews and observations suggest that the criteria to determine when youth could transition back to communities and whether the transition was positive or not depended largely on professionals' understandings of the needs of youth. Whether these criteria and understanding of needs were congruent with those perceived by youth, families, and communities was not assessed. This is an important limitation for the study, but it mirrors the gap within the system of care. During our 14-month assessment, we witnessed no explicit and systematic attempt to obtain the perceptions of families and communities regarding youths' wellbeing. There may be various reasons for this gap, including geographical distance, a lack of formal ties between the institutions and the communities, and the tendency of managers and staff to focus on daily crisis situations.

Second, what counts as "culture"? Managers and staff felt that youth's ability to sustain a connection with their "culture" via a variety of traditional activities enhanced their ability to reduce harmful behaviours and to engage in educational, social, and economic activities following their transition. The incorporation of culture via traditional activities, the presence of Aboriginal staff in care, and the ability to speak one's mother tongue have been discussed as important steps toward developing cultural competence in rehabilitative or healing programs (Gone, in press). Gone reports: "Even in therapeutic settings where indigenous healing practices are formally absent, token gestures to indigenous cultural practices are thought to at least reassure First Nations clients that available offerings of 'mainstream' therapeutic approaches can indeed be made relevant and useful for them, too." However, considering that the "cultural" activities were not always run by Aboriginal people, that they did not take place with family members, as they normally would, and that they sometimes had to be substantially adapted to the urban reality (e.g., a gun handling class), we wonder at what point culture loses its communal or collective meaning.

Finally, whose agenda does cultural competence serve? Residential workers have the mandate of stabilizing youth in crisis. These youth often come from families and communities with long histories of trauma. Managers and staff feel that no matter how hard they worked with the youth in the residence, they would ultimately return to harsh environments with few available services. Considering that the current system of care has been unable to address the structural causes of the over-representation of Aboriginal people in care and considering the long-lasting intergenerational effects of residential school experiences on Aboriginal people and communities, some may argue that no matter what is put in place, transitioning from residence to community cannot be culturally appropriate because it implies that youth were taken away in the first place.

When working with Aboriginal peoples, cultural competence requires meeting the needs and expectations of youth, families, and communities at large (Libesman, 2004). Structural and institutional power differences must be addressed (Libesman, 2004; Williams, 1997). In order to target some of the underlying causes for the high rates of placements of First Nations, Métis, and Inuit youth of Canada —poverty, lack of child care services, alcohol and substance abuse, ruptures in transmission of parenting skills (Blackstock & Trocmé, 2005; Lafrance & Bastien, 2007; Rae, 2011) — some have suggested the creation of community-based, family-oriented programs that attempt to meet the needs not only of the youth, but their families and communities (Bennett, Blackstock, & De La Ronde, 2005; CASW, 1994, p. 158; Blackstock & Trocmé, 2005; Lafrance & Bastien, 2007; Libesman, 2004; National Indian Child Welfare Association, 2000; Rae, 2011). Working at the community level enhances cultural competence by creating links with community services, as well as fostering and strengthening leadership within the community (Libesman, 2004; Pierce & Pierce 1996). Finding community-based solutions would also help break the transgenerational cycle of the removal of children into placement.

These questions remind us of the complexity of creating "culturally competent" care within large systems and institutions of care. They point toward the need to develop other models that give more emphasis to issues of power, to insure that the voices and perspectives of Aboriginal youth, families, and communities are fully engaged and can direct the organization and delivery of culturally safe and appropriate health and social services (Brascoupé & Waters, 2009; Kirmayer, 2012).

Limitations and Future directions

This study was based on data collected for quality assurance purposes and therefore the data available for analysis is limited. This work is based on interviews with six staff concerning the experiences of 11 youth. However, the use of participant observation over a period of 14 months provided rich background information to understand the context of care and the experiences of the youth in care, and this informed the interpretation of the interview data. Interviews were only conducted with staff members in the residence. Moreover, the researchers and research assistants involved in the observation and analysis are non-Aboriginal.

Multiple actors are involved in the transition, including social workers, judges, lawyers, family members, community members, and the youth themselves. Different stakeholders may have distinct views with regard to wellbeing, the efficacy of residential programs, and what are considered to be positive outcomes of transition out of care.

A better understanding of the obstacles and facilitators to transition would require the perception and experiences of the youth transitioning out of care, the families as well as the communities. As noted previously, a culturally safe and competent program must aim to meet the social, cultural, and linguistic needs of youth, families, and communities. Criteria to determine whether transition is successful or not must be developed in collaboration with these different actors to determine what their needs are, and how these needs can be met. Further work is essential to listen to the voices of youth, families, and communities, engage them as active agents in the design and delivery of care, and insure that services respond to their needs.

References

Anglin, J.P. (2004). Creating "Well-Functioning" Residential Care and Defining Its Place in a System of Care. *Child & Youth Care Forum,* 33 (3), 175-192.

Bascoupé, S. & Waters, C. (2009). Cultural safety: Exploring the applicability of the concept of cultural safety to Aboriginal health and community wellness. *Aboriginal Health Journal*, 5 (12), 6-41.

Bates, B.C., English, D.J., & Kouidon-Giles, S. (1997). Residential treatment and its alternatives: A review of the literature. *Child & Youth Care Forum*, 26 (1), 7 – 51.

Betancourt, J. R., Green, A. R., Carrillo, J. E., & Ananeh-Firempong, O. (2003). Defining cultural competence: A practical framework for addressing racial/ethnic disparities in health and health care. *Public Health Reports*, 118 (4), 293–302.

Blackstock, C. & Trocmé, N. (2005). Community-based child welfare for aboriginal children: supporting resilience through structural change. *Social Policy Journal of New Zealand,* 24, 12-33.

Blackstock, C., Trocmé, N., & Bennett. (2004). Child maltreatment investigations among Aboriginal and non-Aboriginal families in Canada. *Violence Against Women*, 10 (8), 1-16.

Blackman, M., Eustace, J., & Chaudhury, T. (1991). Adolescent residential treatment: A one to three year follow-up. *Canadian Journal of Psychiatry, 36*, 472–479.

Blumer, H. (1969). *Symbolic Interactionism: Perspective and Method.* Englewood Cliffs, NJ: Prentice-Hall.

Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3, 77-101.

Brendtro, L., Brokenleg, M., & Van Bockern, S. (1990). *Reclaiming youth at risk: Our hope for the future*. Bloomington, IN: National Educational Services.

Bruner, J. (1993). Do we "acquire" culture or vice versa? *Behavioral and Brain Sciences*, *16*, 515–516.

Burns, B. J., Hoagwood, K., & Mrazek, P. J. (1999). Effective treatment for mental disorders in children and adolescents. *Clinical Child and Family Review*, *2,* 199–254.

Camilleri, C. (1989). La culture et l'identité culturelle : Champ notionnel et devenir. In C. Camilleri, C. & M. Cohen-Emerique. *Chocs de cultures : concepts et enjeux pratiques de l'interculturel (pp 21-77)*. France : L'Harmattan

Canadian Association of Social Workers (CASW). (1994). The Social Work Profession and the Aboriginal People : CASW Presentation to the Royal Commission on Aboriginal Peoples, *The Social Worker*, 62 (4),158.

Cauce, A., & Morgan C. J. (1994). Effectiveness of intensive case management for homeless adolescents: Results of a three month follow-up. *Journal of Emotional and Behavioural Disorders*, 2, 219-227.

Cleaver, H. (1998). Contact: The social worker's experience. *Adoption and Fostering*, 21, 34-40.

Cross, T., Bazron, B., Dennis, K., & Isaacs, M. (1989). Towards a culturally competence system of care. Washington, DC: National Technical Assistance Centre for Children's Mental Health, Georgetown University Child Development Centre.

Cunneen, C., & Libesman, T. (2000). Postcolonial trauma: The contemporary removal of indigenous children and young people from their families in Australia. *Australian Journal of Social Issues, 35* (2), 99–115.

Delfabbro, P.H., Barber, J.G., & Cooper, L. (2003). The role of parental contact in substitute care. *Journal of Social Service Research*, 28 (3), 19-40.

Demazière, D. (2011). L'entretien biographique et la saisie des interactions avec autrui. *Recherches Qualitatives,* 30 (1), 61-83.

Fall, K. A., & Berg, R.C. (1996). Behavioural characteristics and treatment strategies with homeless adolescents. *Individual Psychology*, 52, 431-440.

Fanshel, D. (1975). Parental visiting of children in foster care: Key to discharge? *Social Service Review*, 49, 493-514.

Fitzgerald, M. D. (1995). Homeless youth and the child welfare system: Implications for policy and Service. *Child Welfare*, 74, 717-731.

Fortune, S., Sinclair, J., & Hawton, K. (2008). Adolescents' views on preventing self-harm: a large community study. *Social Psychiatry and Psychiatric Epidemiology*, 43, 96-104.

Fraser, S., Rousseau, C., Burmester, P., Arauz, M-J. (submitted). Culturally appropriate care, a multicultural task: Assessing the needs of Inuit youth under youth protection.

Frensch, K.M., & Cameron, G. (2002). Treatment of choice or a last resort ? A review of residential mental health placements for children and youth. *Child & Youth Care Forum*, 31 (5), 307- 339.

Galley, V. J. (2010). Summary of Aboriginal over-representation in the child welfare system. Saskatchewan Child Welfare Review Panel. Retrieved from http://saskchildwelfarereview.ca/Aboriginal-Over-representation-VGalley.pdf.

Gone, J.P. (in press). Redressing First Nations historical trauma: Theorizing mechanisms for Indigenous culture as mental health treatment. *Transcultural Psychiatry.*

Hair, H.J. (2005). Outcomes for children and adolescents after residential treatment : A review of research from 1993 to 2003. *Journal of Child and Family Services*, 14 (4), 551-575.

Hillan, L. (2005). Reclaiming residential care: A positive choice for children and young people in care. Acton, ACT: The Winston Churchill Memorial Trust of Australia.

Kirgin, K.A., Braukmann, C.J., Atwater, J.D. & Wolf, M.M. (1982). An evaluation of teaching-family (Achievement place) group homes for juvenile offenders. *Journal of Applied Behavioural Annals,* 15 (1), 1-16.

Kirmayer, L.J., Hayton, B., Malus, M., Jimenez, V., Dufour, R., Quesney, C., … & Ferrara, N. (1994). Suicide in Canadian Aboriginal Populations: Emerging Trends in Research and Intervention: A Report for the Royal Commission on Aboriginal Peoples, Report Number 1. Montreal, QC: Culture & Mental Health Research Unit, Institute of Community & Family Psychiatry, Sir Mortimer B. Davis—Jewish General Hospital.

Kirmayer L.J., Fraser, S.L., Fauras V., & Whitley, R. (2009). Culture and Mental Health Research Unit Report No. 14. Montreal. Retrieved from At www.namhr.ca/pdfs/Suicide-Prevention.pdf.

Kirmayer, L.J., (2012). Cultural competence and evidence-based practice in mental health: Epistemic communities and the politics of pluralism. *Social Science & Medicine*, 75, 249-256.

Lafrance, J., & Bastien, B. (2007). Here be Dragons! Breaking down the iron cage for Aboriginal children. In I. Brown, F. Chaze, D. Fuchs, J. Lafrance, S. McKay, & S. Thomas Prokop (Eds.), *Putting a human face on child welfare: Voices from the Prairies* (pp. 89-113). Prairie Child Welfare Consortium Retrieved from http://www.cwrp.ca/fr/node/1013.

Larzelere, R.E., Dinges, K., Schmidt, D., Spellman, D.F., Criste, T.R., & Connell, P. (2001). Outcomes of Residential Treatment: A Study of the Adolescent Clients of Girls and Boys Town. *Child & Youth Care Forum*, 30 (3), 175-185.

Lavergne, C., Dufour, S., Trocmé, N., & Larrivée, M-C. (2008). Visible minority, Aboriginal, and Caucasian children investigated by Canadian Protective Services. *Child Welfare,* 87 (2), 59-76.

Lewis, W. W. (1982). Ecological factors in successful residential treatment. *Behavioural Disorders,* 7, 149–156.

Libesman, T. (2004). Child Welfare approaches for indigenous communities: International Perspectives. Child abuse prevention issues, National Child Protection Clearinghouse, 20 Retrieved from http://www.aifs.gov.au/nch/pubs/issues/issues20/issues20.html

Lieberman, R. E. (2004). Future directions in residential treatment. *Child & Adolescent Psychiatric Clinics of North America*, 13, 279–294.

Lindsey, E. W., Kurtz P. D., Jarvis, S., Williams, N. R., & Nackerud, L. (2000). How runaway and homeless youth navigate troubled waters: Personal strengths and resources. *Child and Adolescent Social Work Journal*, 17, 115-140.

Lyons, J.S., Woltman, H., Martinovich, Z., & Hancock, B. (2009). An outcomes perspective of the role of residential treatment in the system of care. *Residential Treatment for Children & Youth*, 26 (2), 71-91.

Maclean, M. G., Embry, L. E., & Cauce, A. M. (1999). Homeless adolescents paths to separation from family: Comparison of family characteristics, psychological adjustment, and victimization. *Journal of Community Psychology*, 27, 179-187.

Malterud, K. (2001). Qualitatative research: standards, challenges, and guidelines. *The Lancet*, 358, 483-488.

Mann-Feder, V.R. & White, T. (2003). Facilitating the transition from placement to independent living: Reflections from a program of research. *International journal of Child & Family Welfare,* 6 (4), 196-204.

Mohajer, M., Bessarab, D., & Earnest, J. (2009). There should be more help out here! A qualitative study of the needs of Aboriginal adolescents in rural Australia. *Rural Remote Health,* 9 (2), 1137.

National Indian Child Welfare Association, Cross, T.L., Earle, K., Echo-Hawk Solie, H., & Manness, K. (2000). Systems of care promising practices in children`s mental health. Volume I. Cultural strengths and challenges in implementing a system of care model in American Indian communities. Comprehensive Community Mental Health Services for Children and Their Families program.

NVIVO qualitative data analysis software (2010). QSR International Pty Ltd. Version 9.

Office of the Auditor General (2011). Programs for First Nations on Reserves. June Status Report of the Auditor General of Canada. Ottawa. Retrieved from http://www.oag-bvg.gc.ca/internet/English/parl_oag_201106_04_e_35372.html

Pithouse, A., & Parry, O. (1997). Fostering in Wales. *Adoption and Fostering*, 21, 41-49.

Prus, R.C. (1996). *Interaction and ethnographic research: Intersubjectivity and the study of human lived experience*. Albany: State University of New York Press.

Rae, L. (2011). Inuit Child Welfare and Family Support: Policies,Programs and Strategies. Ottawa: National Aboriginal Health Organization.

Rocher, G. (1968-69). Culture, civilisation et idéologie. In *Introduction à la sociologie générale*, Première partie : L'action sociale, chapitre 4, pp. 101-127. Montréal : Éditions H.M.H.

Rousseau, C., Rufagari, M-C., Bagillishya, D., & Measham, T. (2004). Remaking family life: strategies for re-establishing continuity among Congolese refugees during the family reunification process. *Social Science & Medicine,* 59 (5), 1095-1108.

Silva-Wayne, S. (1995). Contributions to resilience in children and youth: What successful child welfare graduates say. In J. Hudson & B. Galaway (Eds.), *Child welfare in Canada: Research and policy implications* (pp. 308-323*).* Toronto: Thompson Educational Publishing.

Slot, N. W., Jagers, H. D., & Dangel, R. F. (1992). Cross-cultural replication and evaluation of the teaching family model of community-based residential treatment. *Behavioral Residential Treatment*, 8, 341-354.

Stage, S. A. (1999). Predicting adolescents' discharge status following residential treatment. *Residential Treatment for Children & Youth*, 16 (3), 37-56.

Stake, E. (2005). *Multiple case study analysis*. New-York: Guilford Press.

Stevenson, L. & Ellsworth, Q. (2003). A national Inuit youth suicide prevention framework. Nunavut: Qikiqtani Inuit Association.

Thompson, G. (1996). Graduating from child welfare: A potentially life threatening transition. *Canada's Children*, 3 (1), 13-14.

Trocmé, N., Knoke, D., & Blackstock, C. (2004). Pathways to the overrepresentation of Aboriginal children in Canada's child welfare system. *Social Service Review*, 78 (4), 577-599.

Tweddle, A. (2007). Youth leaving care: How do they fare? *New Directions for Youth Development*, 113, 15-31.

Vachon, M. (2010). Le groupe de discussion comme espace de soutien: briser l'isolement chez des survivantes du génocide rwandais. *Recherches Qualitatives, 29(3), 133-144.*

Wells, K., Wyatt, E., & Hobfoll, S. (1991). Factors associated with adaptation of youths discharged from residential treatment. *Children and Youth Services Review*, *13,* 199–216.

First Peoples Child & Family Review

An Interdisciplinary Journal Honoring the Voices, Perspectives and Knowledges of First Peoples through Research, Critical Analyses, Stories, Standpoints and Media Reviews

Volume 7, Number 1, 2012, pp. 76-83

Jumping through hoops: An overview of the experiences and perspectives of Aboriginal mothers involved with child welfare in Manitoba

Marlyn Bennett[a], Leslie Spillett[b], and Catherine Dunn[c]

[a] Director of Research, First Nations Child & Family Caring Society of Canada, Winnipeg, MB, Canada

[b] Executive Director, Ka Ni Kanichihk Inc., Winnipeg, MB, Canada

[b] Lawyer, Catherine Dunn Law Office, Winnipeg, MB, Canada

Abstract

This article provides an overview of the experiences of Aboriginal mothers involved with child welfare in Manitoba. Jumping through hoops was a prominent perspective evident in stories and reflections that Aboriginal mothers shared about their experiences with child welfare and legal systems. The research drew upon interviews and talking circles conducted with Aboriginal women, and included interviews conducted with community advocates and lawyers in the spring and summer of 2007.

Introduction

In 2005, Ka Ni Kanichihk, an urban-based Aboriginal organization in Winnipeg, launched a study focusing on the experiences and disproportionate representation of Aboriginal women involved in the child protection system in Manitoba and consequently the role of the justice system in their lives and those of their children. Ka Ni Kanichihk, along with several community organizations and institutions, created a coalition of stakeholders to oversee the project and to explore the nature of Aboriginal mothers' experiences in child protection cases before the courts.

This paper describes the perception Aboriginal mothers have of their experiences with child welfare workers, the child welfare system, and legal representatives, and the understanding Aboriginal mothers have of alternative dispute resolutions. In addition, this paper highlights the solutions and recommendations made by mothers involved in this study to help the child welfare and family court systems improve relations and work with and for Aboriginal mothers and their children.

Corresponding author:

Marlyn Bennett, (204) 452-9467

mbennett@fncaringsociety.com

Methodology

This research took a phenomenological approach to understanding lived experiences and perceptions about child welfare and legal systems through the personal lens of Aboriginal mothers and grandmothers.

Sample

Participants included 32 Aboriginal mothers[1] who have had, or were at risk of having, their children apprehended by the child welfare system in Manitoba due to child protection concerns. Participants were recruited between March and June 2007 from Winnipeg and The Pas using an email strategy, word of mouth, and formal invitations by the research team through their various network connections. Criteria required that participants be Aboriginal (First Nations, Métis, Inuit, or non-status Aboriginal) women 18 years of age or older. The majority of the women were 41–50 years old single mothers. The sample included women who participated in both a one-on-one personal interview and one of three talking circles.

Procedures

A detailed literature review was conducted to explore the extent and complexity of Aboriginal mothers' experiences with the child welfare and court systems in Canada[2]. A survey was created to collect background/personal information. In-depth, open-ended interviews were conducted with each participant by one of three team members. Two non-traditional talking circles were held in Winnipeg, and one was held in The Pas.

Data Analysis

All interviews and talking circles were audio-taped and later transcribed verbatim. Each interview was thematically analyzed. The interviews and talking circles conducted for this study yielded over 500 pages of rich narrative text once transcribed.

Results

The mothers often started out by sharing stories about how they first came into contact with the child welfare system. For many of these mothers, involvement with the child welfare system began when they were children or youth themselves and continued into adulthood when they had children of their own. Their stories reflect collective and common perceptions about how the child welfare system functions and operates against them because of their life circumstances.

Collectively, the mothers' narratives reflected six predominant themes[3]:

1. How Aboriginal mothers came into contact with child welfare
2. The context of the mothers' lives
3. Specific experiences with the child welfare system (e.g., treatment by child welfare staff and supervisors, racism, visitation, etc.);
4. Insight of mothers into their own experiences (e.g., acknowledging their own mistakes, emotions, coping, etc.)
5. Experiences with lawyers
6. Mothers' knowledge around alternative dispute resolution

The following sections focus on only three of the six themed areas: experiences with child welfare, experiences with lawyers, and mothers' knowledge of alternative dispute resolution mechanisms used in the child welfare context.

Experiences with the Child Welfare System

Fear of "the system"

Mothers expressed great fears around seeking out treatment or assistance they needed for fear that their children would be apprehended. This is reflected in the following comment:

I was even scared to go for treatment because I figured … if I'm gonna go for treatment then it means I got a problem and they're gonna find a reason to take my kids away. And that's what happened, right? I … tried to do that anyway and then they wound up taking my kids away.

Being monitored

A few of the narratives spoke of being subjected to numerous drug and alcohol tests by child welfare agency staff. Closely related to drug and alcohol testing was the feeling of being watched by child welfare. Mothers felt strongly that being under scrutiny was an invasion of their privacy. This is evident in the comment by this mother:

> … they would get somebody to spy on my home, they knew people were coming in there, they had specific names. They had people watching my home and I'm going to try to make a court case saying that's invasion of my privacy and movement.

Triggering mothers' anger

Mothers often felt that social workers deliberately tried to make them angry, as this mother reflected:

> They want to set you up. There are key words and there are key things they try to throw at you to make you fly off the handle. I'm not stupid; I know their game.

Visitation arrangements

Mothers who participated in the interviews and talking circles unanimously admitted to experiencing many problems and difficulties around their visitation rights. Visits were inconsistent, held infrequently, and were often too short. Mothers stated that visits were often supervised and took place in the office of the child welfare agency:

> I looked forward to the Saturday visitations I had with them for an hour. That was very hard, very hard to see them crying because they had to leave me. And it's not like I could walk to a park and be alone with them; I had to be supervised. I'm not an abusive mom … that I could not understand. What did they think I was going to do with my kids? It was awful.

Harm to children while in care.

In addition to the pain and loss experienced by Aboriginal mothers when their children were removed from them, many mothers expressed fear and concern over the impact on their children of removal. The most frequently cited worry that mothers brought to our attention was that their children would have been or actually were sexually abused while in care:

> At one point my family had to intervene because my kids were in a foster home where it was a cult. There was sexual abuse going on. There was physical abuse going on. The foster mom actually got her licensed pulled.

Mothers also viewed the loss of opportunities to develop deeper relationships with their children as a profound impact of the removal.

Child welfare expectations and programming

Many of the mothers shared that they attended numerous programs at the request of the child welfare worker and agency. For many of the mothers, it felt as though they were over-programmed and expectations seemed to change from month to month:

> I had to jump through hoops … going through parenting programs … I don't even know how many programs … I went for treatment. … I got so many certificates it's unreal.

Jumping through hoops

Mothers reported feeling that they had to jump through hoops to satisfy child welfare workers. This sentiment was reflected in the following comments:

> You're a person who's trying to live your life and then you're going to try and jump through hoops … this jumping through hoops business was getting me mad.

> It's just one frustration after another. It's like you have to jump through hoops … they don't tell you exactly what it is that they want.

Experiences with lawyers

The issue of rights and lack of knowledge around their rights as parents was a predominant theme in conversations with mothers. Mothers also shared both positive and negative experiences dealing with lawyers representing them in child protection cases. Mothers' discussions touched upon the court experience and their knowledge, or lack of knowledge, about alternative resolutions to child welfare matters.

Lack of awareness regarding rights

Mothers stated that, when Child and Family Services first apprehended their children, they often did not know where to turn for help and assistance. They were not sure how to obtain a lawyer or where to get Legal Aid assistance. They felt that the child welfare workers they came into contact with were not helpful in providing the information mothers needed to understand what to do next.

Aboriginal mothers made numerous comments about the quality of services provided by the Legal Aid lawyers who represented them in child protection matters before the courts. Evaluation of the quality of legal services received was primarily negative. Many mothers indicated that their lawyers did not appear to adequately defend or represent them in court. Many said their lawyers counseled them to agree with the decisions made by the child welfare agency. For many, it appeared that the lawyers worked for child welfare agencies and made decisions in consultation

with child welfare agencies rather than with the mothers they represented. This perception is evident in the adamant statement from this mother:

> I don't know who told me … they said [the lawyer] works for Child and Family Services.… Wouldn't that be a conflict of interest for her to take my case against them because she works for them? All she was trying to do was make me sign papers to do whatever they wanted. I knew deep down inside, no I'm not doing it. I don't feel right about it.

In many instances, mothers indicated that they had a minimal amount of time with their lawyers prior to the courtroom experiences and felt their lawyers were essentially strangers who did not provide them with the sort of strength, comfort, and friendship they needed under the circumstances.

The majority of mothers interviewed for this study agreed that family law courts are not an appropriate environment to oversee child protection issues involving Aboriginal families. The common response from mothers in this study was that courts are a very intimidating setting where many felt harshly judged. The mothers' sense of intimidation was connected to difficulties understanding the terminology and language used within the courtroom. Their collective perception centers around the belief that, within the court setting, the decisions made by judges are one sided, and favour the interpretation of the child welfare agencies.

Lack of courtroom supports and advocates

Mothers expressed concerns about not being allowed to bring supportive people with them into the courtroom to face judges, lawyers, child welfare staff, and other courtroom personnel. The inequity of the situation was reflected by one mother this way:

> The advocate … wasn't allowed in the courtroom. Well … what I said was, "Oh, you guys are allowed all your people but I'm not allowed to have mine?"… No, you need someone there! They need to change that definitely. You should be allowed whoever you want in court with you....

Knowledge of alternative dispute resolutions used in the child welfare context

None of the mothers interviewed for this study were aware of the various alternative dispute resolutions that could be used in the child welfare context (e.g., mediation or family group conferencing). Mothers admitted they were not knowledgeable about any mediation approaches that might have helped them deal with the negativity they encountered when interacting with child welfare staff. Furthermore, Aboriginal mothers reported that child welfare staff and lawyers rarely offered suggestions to alleviate the tension inherent throughout the child welfare experience. There really was no alternative, as this mother noted:

> I don't know any alternatives other than going to court and trying to fight and saying, 'No, I want my kid back,' and that's the only thing I know… I don't know … what there is … for someone in my situation … The only way is their way and … they're the law. They're the justice system.

Optimism for the future

Regardless of the time children spend in care, mothers in this study were optimistic that they would resume a relationship with their children once they transitioned out of the child welfare system. Despite their circumstances, the mothers indicated that they continued to work on

themselves in order to be strong for the day when they might be reunited with their children, as this mother poignantly shared:

> It hurts, but I know one day my children are going to be 18, and if they turn 18 and they decide to come home, I want to be mentally and physically ready for my children. And I want to be healthy for my children. So I know I have a lot of healing and work to do on myself.

Mothers' recommendations for change

This study gave Aboriginal mothers an opportunity to voice their perspectives about their experiences and to provide suggestions for simple changes that might help mothers better understand the child welfare system. The following recommendations were generated from a synthesis of the responses provided by the mothers and by the researcher's observations and analyses of the findings.

1. Development of an Aboriginal Mothers' Advocates Office or Institute. This would provide a formal organization to help Aboriginal mothers navigate all aspects of the child welfare system within the Province of Manitoba.
2. Establishment of a training program for Aboriginal Mothers' Advocates. The Aboriginal Mothers' Advocates Office would be responsible for training Aboriginal mothers to become advocates. The mothers in this study suggested that advocates be mothers who have intimate knowledge and experience dealing with the child welfare and legal systems.
3. Development of a manual on the child welfare and legal systems. This manual would outline the things Aboriginal mothers could expect during their contact with child welfare/court processes. It should include the following:
    - Anticipated timelines
    - User-friendly terms and definitions
    - Information on the legal process
    - Information on how to access and instruct legal counsel
    - Information on access to programs and treatment resources for Aboriginal mothers involved with the child welfare system
4. Development of mothers' support groups. The mothers in this study identified the need to develop more support groups across the province for Aboriginal mothers involved with the child welfare system.
5. Courtroom Advocates. Mothers in this study suggested that close family, friends, and other supporters should be allowed into courtrooms.
6. Development of a website. A website could include the following:
    - Information about the Aboriginal Mothers' Advocates Office
    - Listing of courtroom advocates
    - Listing of training opportunities
    - A calendar of support group activities
    - A listing of the resources, programs, and treatment options available to Aboriginal mothers involved with child welfare

- Listing of and link to contact information for lawyers who specialize in child welfare matters.

7. Development of an anthology of Aboriginal mothers/grandmothers' stories and experiences. There are very few resources that celebrate what it means to be an Aboriginal mother and grandmother. This recommendation would see the creation of a book that gives Aboriginal mothers and grandmothers a chance to share stories that reflect the challenges faced by Aboriginal mothers and celebrates their strength and resilience.

Discussion and Conclusion

There is a clear need to move the child welfare and legal systems toward the use of alternative strategies when working with Aboriginal families. Fundamental changes to the child welfare system can only happen when room is made for collaborative dialogue between those with power to change system structures and those with courage to challenge existing oppression. The recommendations arising from this research seem to advocate "tinkering" with the current system rather than making fundamental changes. This may reflect a general lack of knowledge on the part of Aboriginal mothers (and many service personnel working in the child welfare system) about available alternative dispute resolution mechanisms. It may also be due to the fact that Aboriginal women lack the power to ensure profound changes to these systems. The economic and logistic feasibility of moving any recommendations forward have yet to be explored. However, Aboriginal mothers and Elders should be involved at every stage in exploring, developing, and implementing proposed solutions.

It is important to note limitations of this work, including the subjective nature of the data produced, limited generalizability of the findings common within qualitative study designs, and a lack of interviews with service providers, which were originally targeted in the work plan.

The voices of mothers and their experiences within the child welfare system have been missing from child welfare literature for far too long. Preliminary findings from this study contribute to evidentiary research that can help child welfare administrators, policy makers, front line staff, and funders assess and tailor services that will engage Aboriginal mothers, children, and families in a more participatory manner that ensures cultural appropriateness and respect for the sacredness of Aboriginal motherhood. The responsibilities of child welfare must be shared, and it is hoped that governments will recognize that Aboriginal children will be healthier and safer only when Aboriginal mothers, fathers, families, and communities are given adequate resources.

Endnotes

1. Many of the women who participated in this study also identified themselves as grandmothers. This paper reflects the voices and perspectives of both mothers and grandmothers, collectively referred to here as "mothers."

2. An extensive literature review was produced in the summer of 2006. See Bennett, M. (2006). Aboriginal mothers' involvement with child protection and family court systems: Examining alternative court processes. Canada's Children, 13(1), 88–93. Available from http://www.cwlc.ca/en/publications/canadas-children.

3. The full report, which captures the essence of these findings, can be downloaded from the Caring Society website at http://www.fncaringsociety.com/sites/default/files/docs/Final_Report_FCDP_Bennett_2008_print.pdf.

First Peoples Child & Family Review
An Interdisciplinary Journal Honoring the Voices, Perspectives and Knowledges of First Peoples through Research, Critical Analyses, Stories, Standpoints and Media Reviews

Volume 7, Number 1, 2012, pp. 84-98

Nog-da-win-da-min: A Collaborative Consultation with First Nations about Children's Well-being

Heather Schmidt[a], Gayle Broad[a], Christine Sy[a], and Rosalind Johnston[b]

[a] NORDIK Institute, Algoma University, Brampton, ON, Canada
[b] Nog-da-win-da-min Family and Community Services, Sault Ste. Marie, ON, Canada

Abstract

The history of the relationship between child welfare agencies in Canada and First Nations has been fraught with pain, and the removal of children from their families and communities is often described as an attempted cultural genocide. The realities of colonization, residential schools, and the "60s scoop" have created a legacy of pain and distrust which can be difficult for today's Native child welfare services to address. Nog-da-win-da-min Family and Community Services (NFCS) is an Anishinaabe agency that decided to consult with its seven member communities in order to obtain their input about future service development, but, with this legacy, were unsure how to engage the communities in meaningful dialogue. As such, they partnered with a team of researchers at NORDIK Institute to design and carry out a community-based consultation. This article explores the collaborative process of creating and tailoring a consultation method to be an empowering and positive experience for participants, to be conducted within safe and accessible spaces throughout the communities. This required a thoughtful process development, which respected participants' knowledge and experiences (local knowledge), accommodated intergenerational trauma with sensitivity, and that employed Indigenous language and concepts (such as the Medicine Wheel) to guide the process. This article outlines some key learnings for others undertaking similar dialogues and consultations.

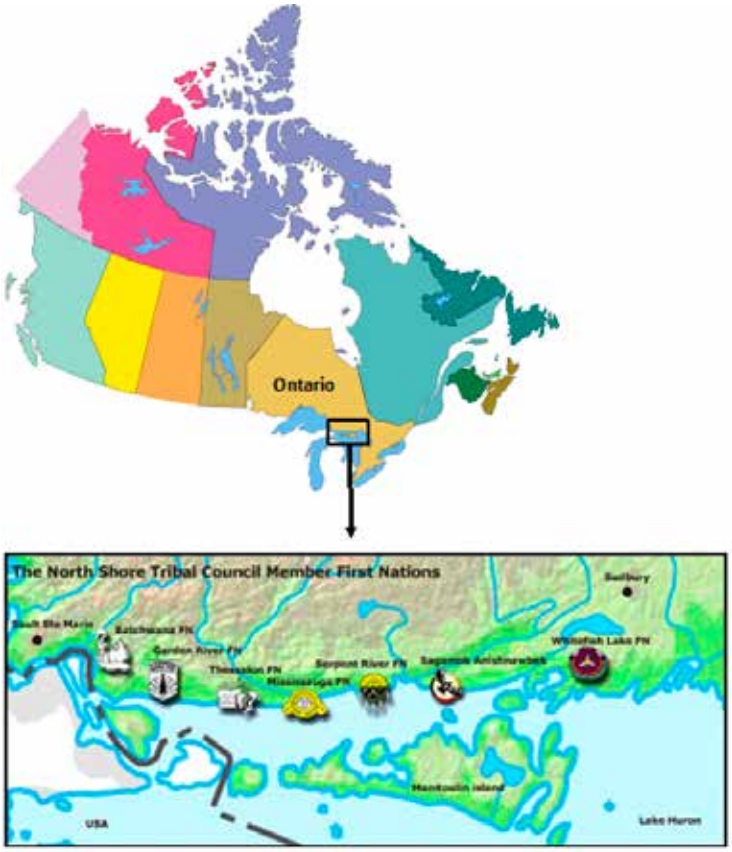
Introduction

Nog-da-win-da-min[1] Family and Community Services (NFCS) is a Native child welfare prevention organization that provides services to the members of seven Anishinaabe First Nations located between Sault Ste. Marie and Sudbury, Ontario, and which together comprise the North Shore Tribal Council: Whitefish Lake, Sagamok Anishnawbek, Serpent River, Mississauga, Thessalon, Garden River and Batchewana. (Please see Map 1). The organization incorporated in August 1990 and is authorized as a Child and Family Services organization under Section 194 of the Province of Ontario's Child and Family Services Act. It is mandated to develop partnerships and relationships related to providing child welfare services, and is responsible to its members for the provision of foster care, family preservation services, assisting families during Children's Aid Society investigations, and transferring

Corresponding author:
Heather Schmidt, Department of Psychology, Crape Breton University, Sydney, NS, B1P 6L2
heather_schmidt@cbu.ca

1 Nog-da-win-da-min is an Anishinaabe word meaning "Achieving a state of well-being by caring for each other."

Map 1: Location of the North Shore Tribal Council First Nations



payments to member First Nations for delivery of community support services (i.e., primary child welfare prevention).

After 17 years of service provision, which included several changes in agency leadership and fluctuating priorities, the Nog-da-win-da-min Board of Directors determined in 2007 that they needed to re-establish and improve their organization's relationship with the seven First Nations they serve. Specifically, they were interested in implementing a community-based research project "to ensure that our community stakeholders . . . have relevant and timely child welfare information to determine the future direction of child welfare services for their communities" (Nog-da-win-da-min RFP document). How else would the organization know how to tailor its services to best meet community needs, without talking to a wide range of people within the communities? In February 2008, the NFCS organization contracted with NORDIK Institute (a community-based research institute at Algoma University) to partner with the Nog-da-win-da-min board of directors and the seven communities in order to help them examine future directions for the organization in the provision of child welfare services. This article explores the process of engaging the communities in such a dialogue, and the lessons learned that may be of value to others.

Engaging the Communities in a Dialogue about Child Welfare

> Engaging the community means taking . . . a "to-do with" approach rather than a "to-do to" or "to-do for" [approach]. (Okubo & Weidman, 2000, p. 309)

Engaging with First Nation communities in a dialogue about child welfare is a substantial challenge, given the disruption to traditional child-rearing methods caused by colonialism and the negative consequences for grief-stricken parents, disempowered communities, and traumatized children (Brubacher, 2006; Bennett & Blackstock, 2002). Further, much of the literature about

Acknowledgement: The authors of this report wish to acknowledge the support provided by the following people: Lorraine Naponse, Nog-da-win-da-min's Manager of Services, who provided guidance in all aspects of this community-based research consultation; the Board of Directors of Nog-da-win-da-min, who have had the courage and foresight to consult the communities they serve; with special thanks to board member Emma Meawasige for reminding us about the importance of acknowledging Anishinaabek ways of raising children in our process; Nog-da-win-da-min staff and First Nation staff who provided much logistical support to the project; And most sincerely, to each First Nation community —Whitefish Lake, Sagamok, Serpent River, Mississauga, Thessalon, Garden River and Batchewana—as well as to the Indian Friendship Center of Sault Ste. Marie; For every community member who willingly shared their time, knowledge and experience in these consultations – this could not be possible without you. Chi-miigwetch / thank you.

First Nations child-rearing has emphasized the deficits and dysfunctions of families in spite of the fact that this approach "tends to miss important elements of the client's life — cultural, social, political, ethnic, spiritual and economic" (Saleeby, 2002, p. 5, as cited in Boston & Broad, 2007). A strengths-based "whole of community" healing approach is critical for working with Indigenous families (Libesman, 2004) because of the historical context of child welfare in Canada. As Chataway (1998) states, "A focus on strengths lends power to those strengths, and creates energy to produce more" (p. 18).

The literature on community engagement suggests that establishing respectful relationships by "starting where the people are" (Labonte & Robertson, 1996, p. 441) is key, and that efforts at engagement must be culturally meaningful (Airhihenbuwa, 1995). Schnarch (2004) further emphasizes the importance of incorporating the OCAP principles (community-based Ownership, Control, Access, and Possession) into research endeavours with First Nations populations if one wishes to be ethical, and to help foster community-level healing and empowerment.

Nog-da-win-da-min had identified the questions to which they wanted answers, but not the methodological approach for asking the questions and eliciting community response. The approach needed to be free from bureaucratic/social-work jargon, yet meaningful and relevant from an Anishinaabe perspective. It needed to give community members from diverse backgrounds and educational levels sufficient information to enter into a discussion and form their own opinion, as well as to create the positive feelings, spirit of optimism and self-confidence for individuals to contribute to such a discussion. The agency could not simply call a meeting about "child welfare" and expect a diverse cross-section of people to willingly attend, nor could they merely sit people down and ask them to respond to a question such as, "Do you think Nog-da-win-da-min should become a fully-mandated child welfare agency?" It would have been disrespectful to enter the communities and ask such complex questions without first establishing a context.

Nog-da-win-da-min also expressed concerns that some community members might not feel comfortable providing candid critiques of the agency's services directly to its employees. Also, if the NFCS representative had strong personal opinions about the questions being asked, would they truly be open to hearing and understanding dissenting opinions? Smith (1999) and Mihesuah (1998) furthermore warn about the high level of distrust toward research that has been cultivated in First Nations by academics who, for decades, exploited Indigenous peoples for their own personal gain — acquiring degrees, grant money, awards, publications and professional esteem, while giving back little in return. The exploitative face of research in First Nation communities is aptly summarized in the following quote:

> We know from past experiences that government research by white researchers never improved our lives. Usually white researchers spy on us, the things we do, how we do them, when we do them, and so on. After all these things are written in jargon, they go away and neither they nor their reports are ever seen again. (Nahanni, 1977, as cited in Jackson, 1993, p. 51)

As a matter of self-protection, many Indigenous people grew distrustful of research and today are no longer willing to be used as academia's "guinea pigs." Thus, considerable thought, planning, and reflection were needed to design a consultation methodology that would both meet the agency's needs and engage the communities in a highly respectful and collaborative manner (Ermine, Sinclair, & Jeffrey, 2004). This article explores the process developed by Nog-da-win-da-min and NORDIK, and the response of the communities involved.

Step 1: Pre-Consultation Considerations. Nog-da-win-da-min's board of directors identified a number of issues for consideration by NORDIK prior to commencement of the consultation process: a) Respect for community autonomy (i.e., each community must maintain control over any consultations conducted within its territory as outlined in the OCAP principles (Schnarch, 2004); b) Quantitative versus qualitative decision-making methods; c) Strategies for eliciting participation; and d) Ethical concerns, regarding the emotional safety of participants. Each of these concerns required different solutions:

a) Respect for Community Autonomy: Despite a shared Anishinaabe history and realities of colonization, resistance and revitalization, each of the seven First Nations had a unique history, culture, preferences, and needs. As such, it was recognized that each community needed to provide input about its own consultation process. Nog-da-win-da-min's executive director therefore contacted the seven communities and three urban off-reserve service providers (i.e., the Sault Ste. Marie Indian Friendship Centre, Wabinoong, and the Sault Ste. Marie office of the Métis Nation of Ontario) and requested some initial direction. In response, three communities and two of the urban off-reserve groups gave their approval to commence the consultation process, while the remaining four communities requested one or more pre-consultation meetings with the NORDIK researchers and an NFCS representative to discuss the proposed project. As a result, meetings were held with two Health & Social Services committees, a Child Welfare committee, a general community meeting, a Health Director, and a First Nation administrative CEO. These initial sessions provided invaluable community input for the development and design of the methodology for the full consultation process, as will be described in more detail below.

b) Developing consensus about Qualitative vs. Quantitative Methods. Nog-da-win-da-min's intent from the conception of the project was to obtain rich, open-ended feedback in response to questions posed to the community. NORDIK proposed to obtain this through an extensive series of focus groups and interviews. According to Jackson (1993), qualitative methods tend to make intuitive sense to many Indigenous peoples because of their similarity to oral history traditions and because these research techniques involve a fairly straightforward and accessible process in which the interviewees have a lot of control over what they say to the researcher. An issue that emerged in the above community discussions, however, was whether or not it would be appropriate to supplement community feedback with quantitative data. In other words, would the research benefit from asking participants to formally vote on questions such as "Should Nog-da-win-da-min become a fully-mandated child protection agency?" Would it be advisable to develop a short yes/no survey which could be placed in community members' mailboxes, enabling a tabulation of the supporting versus dissenting percentages?

While some were initially in favour of this additional component, others argued that interpretation of the results could pose a problem. For example, even if 45 per cent of survey participants voted in favour of Nog-da-win-da-min becoming fully mandated, there would be no way to determine why these people had voted in such a manner. Also, interview and focus group methods would allow for researchers to share some vital information with participants about Nog-da-win-da-min's current services, whereas survey participants would not necessarily have the same information and might not be fully aware of the ramifications of their choice. Furthermore, some community members might be undecided and unable to choose between a yes or no response option, or might have more complex responses, such as "Yes, I would support Nog-da-win-da-min becoming mandated but only if the following conditions can first be met. . . ." After much discussion and debate, it was concluded that focus groups and interviews were the most appropriate methods because they would provide the richest feedback and allow participants the space to engage meaningfully with the questions being posed.

c) Participation Strategies. Being a neutral third party, it was decided that the NORDIK researchers would have the most likelihood of eliciting candid feedback from community members. At the pre-consultation meetings, NORDIK researchers asked the various committees for suggestions about eliciting participation within their communities. Given their insider knowledge about the communities, were there specific groups and/or individuals who should be invited to participate in the process? Were there any already-established group meeting times (among health and social services staff, Elders, parents, community kitchens, and so on) within the community that could potentially be visited for consultations? In three communities, NORDIK researchers were advised first to visit informally during regularly-scheduled Elders' lunches/teas to discuss the proposed focus group process, and then request permission from the Elders to return to conduct the consultation process at a later date. These initial meetings, though not part of the formal consultation process, allowed the researchers to become acquainted with individuals in the communities and to begin establishing the relationships and rapport which are so crucial for trust-building and acquiring candid responses.

During the pre-consultation phase, each community was asked to designate a "contact person" who would assist by organizing a series of two to four focus groups and inviting people to attend. At the meetings, it was also decided that the NFCS family preservation workers were the best people to assist in setting up interviews with former Nog-da-win-da-min clients. To further facilitate participation, the Nog-da-win-da-min agency covered the costs of snacks for each focus group, as well as the chance for each participant to put their name into a prize draw. Each of the seven communities, plus the urban off-reserve group, was given a donated prize and winners were selected at a general NFCS meeting held in September 2008.

d) Emotional Safety and related Ethical Concerns. Issues of emotional (and spiritual) safety for participants (as they relate to the history of child welfare within First Nations) were of key concern. One Elder on Nog-da-win-da-min's board of directors stressed the importance of finding ways to acknowledge Anishinaabek child-rearing practices in the consultation process. The various committees and NFCS staff also advised that a list of local support services (with contact information) should be included on NORDIK's consent forms, including local mental health professionals and community Elders who were willing to offer support and assistance. Each community was also asked whether they would like an Elder to be present during their focus groups and/or interviews. Depending on the needs of the particular community, the Elders were invited to say an opening and closing prayer (e.g., Anishinaabek or Christian), offer a smudging ceremony to begin the process, and be on hand to offer support to participants as needed. These

Figure 1: Nog-da-win-da-min, Anishinaabek Children & *Minobimaadziwin*

Elders also contributed their voices to the consultation process. To facilitate this support, Nog-da-win-da-min offered an honorarium to each Elder as a way to recognize and honour their knowledge of ceremony, prayer, and participation. Reflecting the diversity among the seven First Nations, some focus groups requested and arranged for an Elder's assistance, while others did not deem it necessary.

Following these pre-consultation sessions, Nog-da-win-da-min's executive director obtained official permission from each of the communities' chief and council for NORDIK to commence conducting the focus groups and interviews that the various committees had agreed upon.

Step 2: Consultation Process. Based on a literature review (e.g., Gaikezheyongai's (2002) in-depth discussion of medicine wheels), feedback from the NFCS board of directors, the pre-consultation community meetings, and the insights of the researchers, NORDIK adapted a four-part medicine-wheel model (see Figure 1) to use in structuring the child welfare dialogue with the communities. A high priority was placed on using language, visuals, and other Anishinaabek-appropriate methods that would (a) be easily understood and accessible to a wide range of community members; and (b) function to create a space for empowered participation. Due to the complex nature of the subject matter for many people, this was a crucial component and also addressed the fact that not everyone entering into the dialogue possessed a working understanding of the current child welfare system.

a) Language. Rather than utilizing the institutionalized language of "child welfare," NORDIK introduced the dialogue to community members by referencing the Anishinaabek concept

of minobimaadziwin which translates as "living a good life"[2]. Operating from this concept, participants were asked to consider the central question: "How do we help our children to live a good life?" The concept of shkaabewis or naadimaagejik (i.e., "helpers") was also discussed: researchers proposed that the Nog-da-win-da-min agency is currently one of the many different helpers that are available, when needed, to assist Anishinaabek families in helping their children to live a good life. In response, some groups shared different Anishinaabek words for helper. Interestingly, the word shkaabewis was not generally recognized by participants, whereas the word naadimaagejik was perceived to be more reflective of how the idea of "helper" is articulated in this region.

The meaning of the word nogdawindamin was also discussed with participants (i.e., "achieving a state of well-being by taking care of each other"). This translation was presented to participants to further enhance the Anishinaabek meaningfulness of the consultation process and to reflect the Anishinaabek roots of the Nog-da-win-da-min organization. Interestingly, though, two different Elders groups suggested that their understanding of the word nogdawindamin was "the process of thinking through a decision and weighing the options." Time and time again, Elders shared with us the importance of recognizing that the communities that comprise the North Shore Tribal Council, while similar in many regards, are also unique, and that one way in which this distinctiveness is revealed is in the different dialects that are spoken across the communities.

After reviewing and discussing these concepts with participants, the rationale for initiating the consultation process across all communities was explained (i.e., to assist the Nog-da-win-da-min board in creating their new strategic plan), and then consent forms were distributed to the participants. After answering all questions and obtaining permission to make an audio-recording of the sessions, the more formal part of the consultation process began.

b) The Medicine Wheel. In each of the community focus groups and interviews, the visual image in Figure 1 was presented and then used to guide the discussion and elicit feedback from the participants on four major topics:

East/Past — Anishinaabek child-rearing practices prior to the arrival of Europeans and European influences ("What would have happened if one parent died and the other was unable to care for the children?" was a sample prompt);

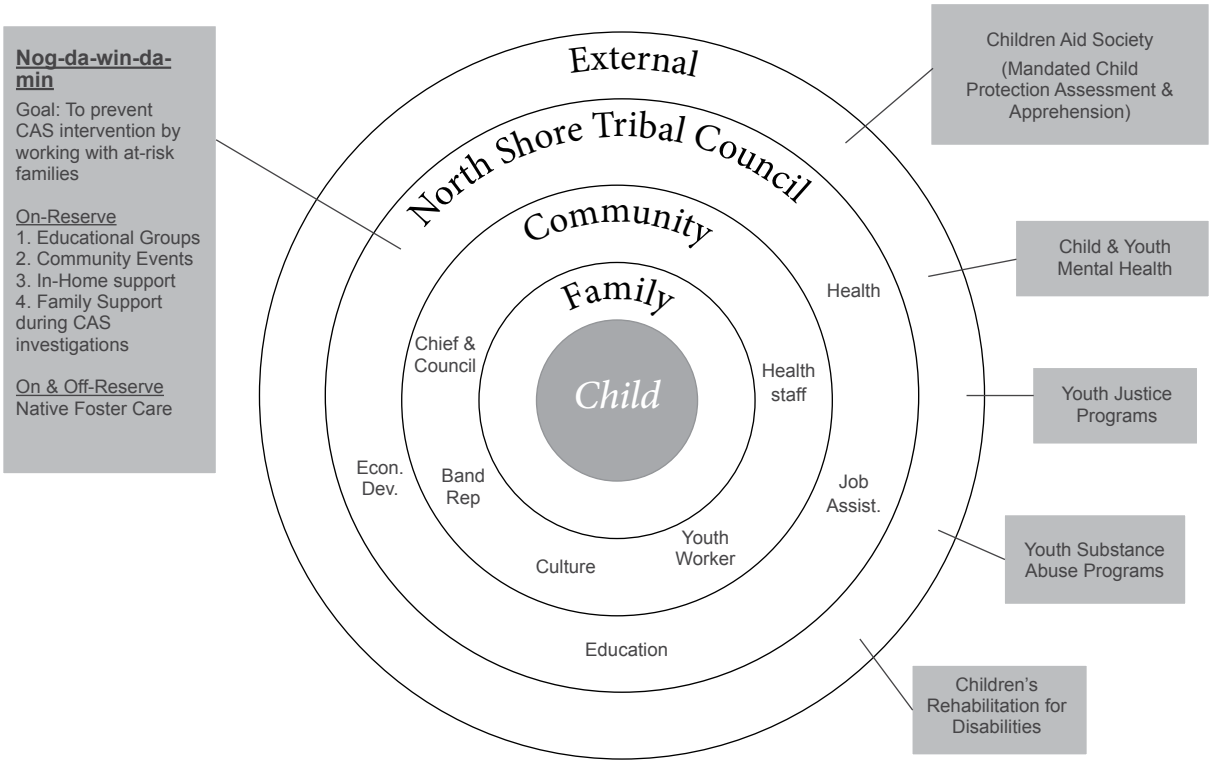
South/Past — Disruptions to Anishinaabek child-rearing practices that occurred as a result of European and Euro-Canadian colonialist practices, as well as methods of resistance and cultural persistence employed by the Anishinaabek (e.g., finding covert ways to continue passing on spiritual practices, hiding children from Indian Agents, and so on);

West/Present — Reclaiming and recognizing both the strengths and areas for improvement in the current child care system as they pertain to Anishinaabek children and families. In order to facilitate this discussion, the researchers presented a second diagram that depicts a visual overview of the current system of programs and services for families and children, including an overview of Nog-da-win-da-min's services (See Figure 2);

North/Future — Visions (i.e., hopes, dreams, wishes) of community-level caring for children and how, specifically, the Nog-da-win-da-min organization should ideally help in creating this vision. A final question then posed to participants was: "Do you want Nog-da-win-da-min to

2 All Anishinaabe terms and definitions were provided by researcher Christine Sy, with additional input provided by community members.

Figure 2: West - A brief overview of the present system of programs and services for families and children



expand its current program delivery to include child protection services?" Exploration of pros and cons was encouraged.

This framework proved highly beneficial and was a crucial foundation in the consultation process. It facilitated meaningful dialogue and provided information to the communities about Nog-da-win-da-min's current services, while at the same time eliciting a wide range of knowledge from the participants about the well-being of families and care of children in their communities. Participants also discussed concerns that they felt were most relevant for their families and communities. This provided a rich dialogue to inform Nog-da-win-da-min's future directions, as well as many possibilities, suggestions, and ideas for the participants' own communities in terms of how children can be cared for at the community level.

c) Response from the Communities. The consultation took the form of 21 focus groups and eight interviews, which were held in all seven First Nation communities serviced by Nog-da-win-da-min, as well as with NFCS staff members and an urban off-reserve group at the Indian Friendship Centre in Sault Ste. Marie. During the initial consultation process, the communities had recommended that NORDIK should consult with Elders groups, health and social services staff, general community meetings, and former Nog-da-win-da-min clients, and these recommendations were carried out. The number of sessions in each community varied as a result

of both community preferences and availability, as did the number of participants (ranging from a minimum of two people per focus group to a maximum of 12 people per group). In total, 146 individuals participated in the consultation process.

Step 3: Interim Community Feedback Sessions. Following the consultations, NORDIK researchers created nine separate draft reports to summarize the different themes that emerged in each of the participating communities (for seven First Nations, one urban centre group, and one Nog-da-win-da-min staff group). The researchers then revisited each of the communities to present these reports and ask the questions: "Is your perspective accurately reflected in this document? Is there anything missing?" — thus ensuring accuracy of the data analysis. This process provided an opportunity for the researchers to further clarify some of the points raised, as well as to discuss the initial consultation process with the communities retrospectively. Furthermore, it provided a second opportunity for reflection upon the consultation questions by the community itself. These second groups often contained some individuals who had been unable to participate in the initial consultation sessions, and so this expanded somewhat the initial participation numbers as well as the variety of perspectives represented in the draft reports. In total, 75 individuals participated in the feedback sessions.

Some communities requested additional time to distribute and discuss their draft summaries and so extra copies of the reports were provided to facilitate this. Additional community feedback was emailed to the NORDIK researchers following these short review periods. After receiving community feedback, the researchers revised the summaries and then emailed them back to the community contact people for general community distribution and sharing. To respect each community's ownership and confidentiality of their own data, the only community-level interim report that was provided to Nog-da-win-da-min was the one which summarized the themes emerging from the sessions conducted with agency staff members. It was hoped that the stories, ideas, and findings will prove interesting and useful to all community members — individuals, families, groups, service providers, political leaders — in their ongoing efforts to support and nurture the children of their communities.[3]

Step 4: Assessing the Validity of Research Findings. During discussions between the NORDIK researchers, Nog-da-win-da-min leadership and others, some concerns and questions about research validity were raised with regard to the number of participants involved in the consultation. Some people wanted to know (a) why the participation numbers weren't higher, and (b) if this posed a problem for the research findings and conclusions. Others wanted to know why the researchers had not set a quota of participants to ensure that a certain minimum percentage of known North Shore community members were recruited to participate in the research. Given that approximately 4,500 registered First Nation citizens live in the communities (reserves) across the seven North Shore First Nations and that about 2,200 of these members are adults, the question was raised as to whether 146 people (less than 10 per cent) could reliably speak on behalf of the total population. Could the research findings be viewed as a valid and accurate representation of the range of perceptions to be found across all seven communities and the urban membership?

A number of interesting perspectives and issues emerged in this discussion. In order to capture the complexity, NORDIK's approach was to: a) relay some thoughts that were shared by the Nog-

3 These findings will not be shared in this article. The Nog-da-win-da-min board of directors agreed to publish this article about the research process, but is still deciding whether the study results should remain public or private. Please feel free to contact the Nog-da-win-da-min agency if you wish to learn more about them: www.nog.ca.

da-win-da-min board of directors during a discussion with the NORDIK research team; b) present an academic qualitative research methods perspective on validity and sampling; and c) provide some insight into the challenges of eliciting community participation.

a) Nog-da-win-da-min and NORDIK dialogue about validity. On January 27, 2009, the NORDIK team presented the overall findings (summarized across all participating communities) from this study to the Nog-da-win-da-min executive director and board members. One board member initially expressed some concern regarding the low participation numbers (in relation to the total population across the seven communities), but she also indicated that when looking at the turn-out from her particular community, she was surprised and happy to see "that many" had come out to participate. This idea was confirmed by another person on the board who indicated that, because of the subject matter (i.e., child protection services, child abuse, CAS, etc.), she understood why people were reluctant to participate and that, indeed, this rate of participation was indicative of something quite positive: that some members of each community are ready and willing to begin talking, healing, and engaging actively in community restoration.

Indeed, in spite of some trepidation at the outset, participants frequently left the focus groups having found the consultation process a safe, surprisingly enjoyable, and stimulating experience. Laughing and joking frequently occurred within the groups as individuals shared stories, pooled knowledge, discussed the issues at hand, and enjoyed being together. Some groups became quite animated when discussing the complexities around the question, "Do you think Nog-da-win-da-min should apply for CAS status and become a child protection agency?" People bounced ideas off each other and in some cases even began prompting and "interviewing" each other. Many people seemed simply to appreciate the fact that an agency was asking them for their opinions and really listening to what they had to say. A number of people asked the researchers if/when we were coming back to continue the discussion, and many indicated on their consent forms that they would like to receive a final copy of this research report. Given that two to three groups within each community were willing to come out and engage in such a discussion, it is quite likely that if Nog-da-win-da-min were to continue having these conversations every six months or so, momentum would build and more and more people would come out to participate. Thus, from this perspective, the level of participation was quite successful.

b) A Qualitative Research Methods Perspective. Objectives differ between quantitative and qualitative approaches to research. The priority with quantitative statistical research is to collect feedback from as many people as possible (Kirby, Greaves & Reid, 2006). Conventionally, more participant contributions (i.e., bigger samples) are seen as better because they are more representative of the actual population. Although an advantage of numerical data is that large amounts can be amassed quickly, a limitation is that only fairly simplistic types of information can be tabulated. Statistical findings can be reported but the explanation as to why a certain percentage of people answered in a particular way can only be speculated on.

In contrast, the goal with qualitative research is to explore a topic in depth so that rich and complex understanding emerges (Mayan, 2009; Kirby, Greaves & Reid, 2006). By necessity, asking exploratory, open-ended questions of people is a much more time-consuming approach. The central goal is not to achieve extremely high participation numbers but, instead, to ensure that the topic is explored as thoroughly as possible. Sampling techniques ensure that a diversity of perspectives has been included (Mayan, 2009). Furthermore, it is recommended that qualitative researchers continue collecting new information until "the saturation point" is reached, which refers to the point at which the researchers begin to hear a lot of repetition in the central themes

being discussed (Shank, 2002). The researchers continue interviewing new participants until they reach the "saturation point" and can anticipate with a good degree of accuracy the topics that new participants will discuss in response to the consultation questions. Another test of validity in the qualitative approach is whether or not the findings resonate with readers, and provide them with new and useful sources of information and ideas (Mayan, 2009).

In the current study, NORDIK attempted to solicit a diversity of perspectives on the topic of child welfare by ensuring that the researchers held sessions within each of the seven First Nation communities, in addition to meeting with Nog-da-win-da-min staff and the urban Aboriginal community. Researchers made multiple visits to the different communities, and attempted to schedule visits on days and times that were convenient to community members. We also spoke to a wide variety of people within each community, such as Elders, community wellness staff, foster parents, former Nog-da-win-da-min clients, and community members in general. Two chiefs, some council members, a few band representatives (a legal position), and some of the original founding members of Nog-da-win-da-min also participated. NORDIK spoke to people who were supporters of Nog-da-win-da-min, people who were unfamiliar with the organization's services, and people who were critical of the organization.

Beyond ensuring a diversity of perspectives, we also reached a point after several months of soliciting people's thoughts, stories, and opinions, at which we were able to discern many common themes across the communities; thus, the saturation point criterion was achieved. Rather than continuing to collect data in order to boast higher participation numbers, it was more useful to Nog-da-win-da-min and to the communities to provide timely and accurate research findings, as soon as they became available.

When the final report was shared with the Nog-da-win-da-min board members and executive director, they validated the findings further when they commented that reading through the results had made them "laugh and cry," "gave them plenty of food for thought," and made them feel as though they "could hear the actual voices of community members speaking." As community members themselves, the board of directors and executive director indicated that the results resonated with them and that, in their opinion, the researchers had been successful in capturing the wide range of perspectives to be found across the different communities.

c) Some Challenges of Eliciting Participation. NORDIK aimed to be flexible and responsive to the "rhythm" of each community; however, overall community readiness to participate in a research project of this nature also affected participation rates. Some communities were quick to mobilize staff members and other resources to facilitate the consultation process. Staff members printed out posters advertising the sessions, personally invited community members to attend, coordinated the sessions around existing activities, and/or organized special lunch/dinner meetings. On the other hand, a variety of challenges to participation were encountered in some of the other communities:

i) The consultations took place primarily during the months of June, July, and August, and NORDIK was informed in advance that perhaps there would be a lower turnout during summer months for such reasons as summer holidays and the powwow season. Although NORDIK did accommodate some groups in September and October, it is possible that greater numbers might have been obtained at different times of the year. Summer scheduling appeared to pose special challenges for many (but not all) staff groups in terms of their rotating vacation schedules and trying to find time to accommodate the consultation process;

ii) Two communities underwent elections of chief and council, and the newly elected councils required time to review the previous decision regarding the consultation process. Elections also sometimes meant that the community contact person changed (as First Nation employee roles changed) and thus the new individuals needed to be oriented to the project. Such people were facing the challenge of commencing a new job in addition to accommodating the needs of this project;

iii) On some occasions, the researchers arrived for scheduled focus groups and interviews only to have no one show up, or to find a very low turnout. NORDIK can only speculate as to the possible reasons, but some likely explanations may relate to the sensitive nature of the subject matter and/or difficulties in advertising and promoting the sessions. At other times, long relays of telephone messages were needed in order to contact suggested interviewees. Many people who were difficult to connect with led busy lives (e.g., taking care of children and/or grandchildren, working in seasonal businesses and/or holding down high-stress jobs). Sometimes scheduling a meeting time in advance was not possible due to their changing, hectic lives. In addition, many of the NFCS workers, who were helping NORDIK organize and advertise these community gatherings and interviews also had busy work schedules and family lives.

iv) On occasion, scheduling was complicated due to lingering distrust for the Nog-da-win-da-min agency that was felt by some individuals, which resulted in a reluctance to participate in the research. In one community, for example, the consultation process was halted temporarily after some community members questioned whether their council had officially approved the consultation project and demanded to see written documentation ascertaining their approval. Scheduling was put on hold until such a letter was secured.

v) The consultation process was halted at another point to address concerns raised by Nog-da-win-da-min leadership regarding the consultation process. This resulted in the cancellation of a number of focus groups that had already been assigned dates, and may have contributed to lower participation rates in those communities affected by cancellations and rescheduling challenges.

In spite of challenges with distrust, uncertainty, and scheduling, however, it is positive to note that meetings were held with all concerned parties that subsequently resolved these issues and allowed the research consultation to progress to completion as planned.

Conclusions: Why did this consultation approach work?

a) Pre-Consultation Phase: The sessions enabled appointed members from the various communities to ask questions, make suggestions, raise concerns, and generally collaborate with the researchers in the development of the research tools. The methods were gradually tailored over the course of these meetings to better meet the needs of the different communities as well as those of Nog-da-win-da-min. While this process of gaining community-level approval and informed consent took two to three months longer to complete than was originally anticipated, it was nevertheless important because it ensured that the project followed appropriate ethical guidelines for conducting research within First Nations as outlined in the OCAP (Ownership, Control, Access, and Possession) principles (Schnarch, 2004). Furthermore, this step ensured that we respected the wishes of the communities as they expressed them, and, at the same time, it maximized our potential for collecting rich community feedback.

b) Holding a Test Group with Staff: Prior to conducting focus groups and interviews within the communities, NORDIK researchers ran through a series of focus groups with Nog-da-win-da-

min staff. This was done to ensure that the wording, questions and process would be meaningful and comprehensible to community members and therefore solicit the desired information. This step also helped to better prepare NORDIK researchers for entry into the communities, and enabled the staff (all of whom were members of the seven communities) to participate in the consultation. As we walked through the proposed dialogue process, NFCS staff provided input (in response to the questions asked) and also suggested changes to wording and other aspects of the protocol. For example, the visual depiction of current services was reconfigured into the series of concentric circles found in Figure 2, during one of these NFCS staff focus groups. Thus, staff members also collaborated in the creation of this methodology, which in turn was useful for those individuals tasked with scheduling groups and interviews; it gave them a clearer sense of what they were asking of their fellow community members.

c) Emphasis on Anishinaabe Strengths: Early advice from an Elder to "acknowledge Anishinaabek traditional methods of caring for children" within our consultation process proved invaluable. It prompted the researchers to incorporate the medicine wheel as a visual and structural tool that would allow for a discussion of child-rearing practices from past/present/future perspectives, as well as to acknowledge the impacts of colonialism on Anishinaabek child-rearing, but within a greater context of Anishinaabek resistance and revitalization. Importantly, it allowed us to begin the consultation on a positive note of Indigenous strength (east), thus setting an optimistic tone for the conversation. Similarly, asking for input on Anishinaabek resilience and persistence in spite of European disruption (south) helped participants to perceive the continued strength of their ancestors (rather than becoming overwhelmed thinking about everything that has been lost due to colonialism). By the time we reached questions about present-day services (west), participants were usually engaged in the process and interested to see how present-day services and practices compared to those already discussed.

d) Empowering through Information: Using Figure 2, NORDIK researchers then provided an accessible overview of current services (west). In order to nurture participant engagement with the current system of services, and to naturalize the fact that its complexity is difficult for anyone not working within it to understand, the NORDIK researchers often prefaced this by stating that they themselves needed the diagram in order to keep all the various components straight. This step helped to clarify how the system works, and thus enabled a wide cross-section of community members to enter into a meaningful discussion critiquing the system's current strengths and weaknesses. In reviewing the current system, many people commented about how the system could be reformed, and also learned about the existence of certain services for the first time (e.g., Nog-da-win-da-min's self-esteem program for youth, entitled, "I'm proud to be me: Anishinaabe") that they asked questions about and expressed an interest in utilizing. By providing the tools to participate fully in this examination of a complicated child-care system, it showed participants that all people's opinions have value and are worthy of respect.

e) "Safe Space": NORDIK researchers acted as advocates for community members (not as representatives for Nog-da-win-da-min, nor with any other agenda). The NORDIK team's priority was simply to get an accurate understanding of community perspectives (however diverse they may be), and then relay this information to Nog-da-win-da-min and community leaders. The fact that the researchers were not affiliated with Nog-da-win-da-min or child welfare services helped to create a "safe space" in which participants felt they could speak openly, without fear of repercussions.

f) Value of Engagement: After participating in the consultation process, a number of community members expressed how appreciative they were of the simple fact that anyone had considered it a priority to ask for their opinions and input before making a policy-level decision, particularly about an important issue like child welfare services in their own community. They spoke about how decisions are often made for them rather than with them, and that they had very much enjoyed the opportunity to participate and engage with others in these important issues. For their part, NORDIK researchers were careful to explain that they had been contracted by Nog-da-win-da-min to run the community consultation process, because the agency wanted individuals to feel free expressing anything (positive, negative, or neutral) about their agency without any fear of repercussions. Many participants seemed to agree that this was a good approach to take, and their impressions of the Nog-da-win-da-min agency began to improve. Nog-da-win-da-min took the vital first steps toward re-establishing a trusting and collaborative relationship with the seven First Nations, and several community members were strongly interested in continuing this conversation with the agency.

g) Separate draft reports belonging to each community: This effort respectfully acknowledged diversity from one community to another, and also provided for additional input into the consultation process. Furthermore, the ownership rights of each community were respected, in that the decision was left up to each community to decide what information should remain private versus being shared publically. The Nog-da-win-da-min board of directors is to be commended for respecting each diverse community's right to privacy and diversity. They approved the NORDIK researchers' request to submit one aggregated research report (following private draft-sharing consultations with each community), so that no community would have to worry about feeling "singled out" or compared (e.g., "These five communities support Nog-da-win-da-min's application to become a mandated child protection agency and these two do not"). The final aggregated report was also useful in emphasizing that there were areas of clear consensus/commonalities across the seven communities in addition to diversity of opinion about Nog-da-win-da-min's present and future roles in child welfare issues.

Nog-da-win-da-min's initiative to re-establish a relationship with its member communities by means of a community-based consultation has led to some important knowledge about engaging in meaningful dialogue with First Nation communities, particularly around difficult issues such as child welfare. Using a strengths-based, Anishinaabek-centric approach in designing the process, using language which anchors the process in the communities' cultural and historical meanings and identities, and respecting the communities' diversities through the use of a variety of spaces and consultation techniques are all key components of a consultation which is engaging, inclusive, and conducive for sharing candid perspectives. In retrospect, one critique of this research design is that more could have been done to build local capacity in terms of community organization and group facilitation skills. Perhaps, as a next step, interested community members can form an ad hoc consultation committee and assist in mobilizing future community dialogues. NORDIK researchers were fortunate to have had this opportunity to work with and learn from the Nog-da-win-da-min organization and the First Nation communities to which it delivers services, and look forward to the revitalized vision of minobimaadziwin for Anishinaabek children.

References

Airhihenbuwa CO. (1995). *Health and culture beyond the western paradigm*. Thousand Oaks, CA: Sage Publications.

Bennett, M., & Blackstock, C. (2002). *Annotated bibliography and literature review on aspects of Aboriginal child welfare*. Winnipeg: First Nations Child and Family Caring Society.

Boston, M., & Broad, G. (2007). *Community corner: A holistic approach to community empowerment in child and family services*. Sault Ste. Marie, ON: Algoma University College.

Brubacher, M. (2006). *Coming home: The story of Tikinagan Child and Family Services*. Sioux Lookout, ON: Tikinagan Child and Family Services.

Chataway, C. J. (1998). Native Canada: The promise of research. *History and Philosophy of Psychology Bulletin*, 10(1), 17-20.

Ermine, W., Sinclair, R., & Jeffery, B. (2004). *The Ethics of Research Involving Indigenous Peoples: Report of the Indigenous Peoples' Health Research Centre to the Interagency Advisory Panel on Research Ethics*. Regina: Indigenous People's Health Research Centre.

Gaikezheyongai, S. (2002). *The story of the seven fires*. Owen Sound, ON: Ningwakwe Learning Press.

Jackson, T. (1993). A way of working: Participatory research and the Aboriginal movement in Canada. In P. Park, M. Brydon-Miller, B. Hall, & T. Jackson, (Eds.), *Voices of Change: Participatory Research in the United States and Canada*, (pp. 47-64). Toronto: The Ontario Institute for Studies in Education Press.

Kirby, S.L., Greaves, L., & Reid, C. (2006). *Experience research social change: Methods beyond the mainstream* (2nd edition). Peterborough, ON: Broadview Press.

Labonte, R., & Robertson, A. (1996). Delivering the goods, showing our stuff: The case for a constructivist paradigm for health promotion research and practice. *Health Education Quarterly*, 23(4), 431-447.

Libesman, T. (2004). Child welfare approaches for Indigenous communities: International perspectives. *Child Abuse Prevention Issues*, 20, 1-39.

Mayan, M., (2009). *The Essentials of Qualitative Inquiry*. Walnut Creek, CA: LeftCoast Press.

Mihesuah, D. A. (1998). Introduction. In D. A. Mihesuah (Ed.), "*Natives and Academics: Researching and Writing about American Indians*," (pp. 1-22), Lincoln: University of Nebraska Press.

Okubo, D., & Weidman, K. (2000). Engaging the community in core public health functions. National Civic Review, 89 (4): 309–326.

Schnarch, B. (2004). Ownership, control, access, and possession (OCAP) or self-determination applied to research: A critical analysis of contemporary First Nations research and some options for First Nations communities. J*ournal of Aboriginal Health*, 80-95.

Smith, L. T. (1999). *Decolonizing Methodologies: Research and Indigenous Peoples*. New York: Zed Books.

Shank, G. (2002). *Qualitative research: A personal skills approach* (2nd ed). Upper Saddle River, NJ: Pearson Education Inc.

First Peoples Child & Family Review
An Interdisciplinary Journal Honoring the Voices, Perspectives and Knowledges of First Peoples through Research, Critical Analyses, Stories, Standpoints and Media Reviews

Volume 7, Number 1, 2012, pp. 99-117

Influence de l'estime de soi, des qualités relationnelles parents-enfants, du soutien social et de l'agression sexuelle sur la résilience auprès d'adolescents autochtones et caucasiens[1]

François Muckle[ab], Jacinthe Dion[ab], Isabelle Daigneault[bc], Amélie Ross[ab], et Pierre McDuff[bc]

[a] Département des sciences de la santé, Université du Québec à Chicoutimi, Chicoutimi, Québec, Canada.

[b] Centre de recherche sur les problèmes conjugaux et les agressions sexuelles (CRIPCAS).

[c] Département de psychologie, Université de Montréal, Montréal, Québec, Canada.

Les auteurs souhaitent remercier la direction de l'école concernée, M. Bouchard, pour sa précieuse collaboration à ce projet ainsi que tous les participants qui ont accepté de partager plusieurs aspects de leur vie personnelle (Tshinashkumitin). Un remerciement spécial à Marie-Frédérique Bouchard pour avoir facilité les contacts avec le milieu de recherche, pour la mise en page du questionnaire et pour l'entrée de données, également effectuée avec la collaboration de Delphine Lagacé. Cette étude a bénéficié d'une subvention du Programme d'aide institutionnelle à la recherche de l'Université du Québec à Chicoutimi, de même qu'elle s'inscrit dans le cadre des activités de recherche du Centre de recherche sur les problèmes conjugaux et les agressions sexuelles (CRIPCAS).

Résumé

Cet article a pour objectif d'explorer la résilience psychologique auprès d'adolescents caucasiens et autochtones. Bien que plusieurs études aient été réalisées sur cette thématique auprès des caucasiens, peu ont été conduites auprès des peuples des Premières Nations, bien qu'ils aient vécu plusieurs événements traumatiques depuis la colonisation. Pour ce faire, 227 participants autochtones et caucasiens âgés de 14 à 17 ans ont répondu à des questionnaires autorapportés. La résilience a été conceptualisée en termes d'absence de détresse psychologique et fut évaluée par le score total obtenu au Trauma Symptom Checklist for Children (TSC-C; Briere, 1989). Le niveau d'estime de soi des adolescents fut mesuré, de même que des facteurs interpersonnels tels le soutien parental, social et communautaire; afin d'être cohérent avec une perspective autochtone qui repose sur une vision interrelationnelle entre l'individu et sa communauté. Dans l'ensemble, les résultats de cette étude révèlent que les adolescents autochtones n'ont pas été davantage victimes d'agression sexuelle que leurs homologues caucasiens, mais ils ont vécu davantage d'événements de vie délétères. Les résultats de l'analyse de régression suggèrent que l'estime de soi et la capacité de l'adolescent à rechercher de l'aide dans sa communauté sont associées à moins de détresse psychologique, soit plus de résilience. Toutefois, avoir subi une agression sexuelle, avoir été exposé à plusieurs évènements de vie stressants, être de sexe masculin et être un adolescent non-autochtone est relié à plus de détresse psychologique. En somme, les présents résultats suggèrent l'importance d'utiliser une approche écologique qui implique à la fois les facteurs personnels et communautaires dans la compréhension des facteurs de résilience.

Mots clés : Résilience, symptômes, facteurs de risque, facteurs de protection, adolescents, Autochtone, agression sexuelle, estime de soi, soutien communautaire, soutien familial.

Corresponding author:

Jacinthe Dion, Professeure en psychologie, Département des sciences de la santé, Université du Québec á Chicoutimi, 555 boul. de l'Université, Chicoutimi (QC) G7H 2B1
Jacinthe_Dion@uqac.ca; (418) 545-5011, ext 5663, (418) 545-5011, poste 566w3

[1] Influence of self-esteem, parent-child relationships, social support and sexual abuse on resilience among Aboriginal and Caucasian adolescents

Abstract

This article aims to explore resilience among Caucasian and Aboriginal adolescents. Although several studies have been conducted on this topic among Caucasians, few concern First Nation peoples, even though the latter have experienced many traumatic events since colonization. A total of 227 Aboriginal and Caucasian participants aged between 14 and 17 years completed questionnaires. Resilience has been conceptualized as the absence of psychological distress and was evaluated by the total score obtained on the Trauma Symptom Checklist for Children. The level of self-esteem in adolescents was measured, as well as interpersonal factors such as parental, social and community support, in order to be consistent with an Aboriginal perspective based on an interrelational view between the individual and his community. Overall, the results of this study indicate that sexual abuse is not more common among Aboriginal youth than their Caucasian counterparts, but they do experience more adverse life events. The results of regression analyses suggest that self-esteem and the capacity of adolescents to seek help in the community are associated with less psychological distress, and thus, more resilience. However, having been sexually abused, being exposed to more stressful life events, being male and being a Caucasian teenager are all factors related to greater psychological distress. Overall, these results suggest the importance of utilizing an ecological approach that involves both personal and community factors in understanding resilience factors.

Key words: Resilience, symptoms, risk factors, protective factors, adolescents, Aboriginal, sexual abuse, self-esteem, community support, family support.

Introduction

En dépit des conséquences néfastes de l'agression sexuelle, il semble que certaines personnes ne présentent en apparence que peu de séquelles à la suite des agressions sexuelles dont elles ont été l'objet. En effet, on estime que près de 30 % des personnes ayant subi une agression sexuelle ne souffriront d'aucun symptôme (Kendall-Tackett, Williams, & Finkelhor, 1993). Cette constatation a porté certains chercheurs à s'intéresser aux facteurs reliés à la résilience chez ces personnes (Daigneault, Hébert, & Tourigny, 2007; DuMont, Widom, & Czaja, 2007; LaFromboise, Hoyt, Oliver, & Whitbeck, 2006; Zahradnik, Stewart, O'Connor, Stevens, Ungar, & Wekerle, 2010). À ce jour, il n'y a toutefois pas d'études s'étant intéressées à cette question auprès des adolescents autochtones vivant au Québec, et ce, malgré un niveau de violence sexuelle significatif au sein des Premières Nations (Collin-Vezina, Dion, & Trocme, 2009), possiblement en conséquence aux nombreux évènements traumatiques survenus depuis la colonisation (Muckle & Dion, 2008). Une meilleure connaissance des facteurs de risque et de protection favorisant ou entravant la résilience pourra éventuellement permettre de répondre plus adéquatement aux besoins des enfants et des familles tant chez les caucasiens que chez les peuples autochtones. Le présent article se propose donc d'explorer les facteurs reliés à la résilience psychologique en contexte d'agression sexuelle auprès d'adolescents autochtones et caucasiens.

Définition, prévalence et incidence de l'agression sexuelle

L'agression sexuelle envers un enfant ou un adolescent concerne toute activité sexuelle perpétrée sous la menace, par la force, l'intimidation ou la manipulation (ministère de la Justice du Canada, 2006a). Elle est habituellement le fait d'un individu plus âgé que la victime, qui utilise la menace physique et psychologique afin de maintenir son emprise (ministère de la Justice du Canada, 2006b). L'agression sexuelle prend diverses formes, il peut s'agir de relations sexuelles, de tentatives d'avoir une relation sexuelle, d'attouchements aux organes génitaux, de l'exhibitionnisme, de l'exploitation sexuelle telles la pornographie et la prostitution, du harcèlement sexuel et enfin du voyeurisme (Centre national d'information sur la violence dans la famille, 2006; Trocmé & Wolfe, 2001).

Deux études québécoises et deux méta-analyses récentes indiquent que la prévalence de l'agression sexuelle dans l'enfance se situe entre 8 et 10 % pour les hommes et entre 18 et 22 % chez les femmes (Pereda, Guilera, Forns, & Gòmez-Benito, 2009; Stoltenborgh, van Ijzendoorn, Euserl, & Bakermans-Kranenburg, 2011; Tourigny, Gagné, Joly, & Chartrand, 2006; Touringy, Hébert, Joly, Cyr, & Baril, 2008). Chez les populations autochtones, la prévalence est plus difficile à établir. En dépit du fait que plusieurs communautés autochtones parlent aujourd'hui davantage de la problématique de l'agression sexuelle, il s'agit encore d'un tabou important qui a des répercussions sur le nombre de dévoilements, ce qui rend la prévalence de la problématique difficile à établir (Muckle & Dion, 2008). De plus, certains résultats d'études ont été mal interprétés ou mal cités, ce qui a conduit plusieurs à croire que la prévalence de l'agression sexuelle pouvait se situer autour de 75 à 80 % chez les personnes autochtones (voir Collin-Vézina, et al., 2009). *Par exemple, les résultats* de Leclair et al. (1996) ont montré que 75 % des victimes autochtones de violence sexuelle étaient des filles âgées de moins de 18 ans et non que 75 % des filles autochtones avaient été victimes d'agression sexuelle (tel que rapporté par *Jiwani et al. [1999] qui cite incorrectement McIvor & Nahanee [1998] concernant l'étude de Leclair et al. [1996])*. De même, à partir d'entrevues conduites auprès de plusieurs acteurs, tels que les victimes, agresseurs, intervenants sociaux, aînés, etc., Levan (1989) déduit que jusqu'à 80 % des filles autochtones de l'Arctique ont été victimes d'agression sexuelle. Bien que ce taux n'ait jamais prétendu être une véritable estimation de la prévalence de l'agression sexuelle, il a ensuite été repris par plusieurs auteurs (p. ex. : Commission royale sur les peuples autochtones, 1996). Ainsi, les résultats d'une récente synthèse des écrits indiquent qu'il est sans doute plus réaliste d'estimer qu'entre 25 et 50 % des adultes autochtones ont été agressés sexuellement avant l'atteinte de leur majorité (Collin-Vézina et al., 2009).

Impacts de l'agression sexuelle

L'agression sexuelle a des répercussions importantes et est associée, selon les cas, à des épisodes dépressifs, de l'anxiété, une dépendance à l'alcool, des comportements antisociaux, un syndrome de stress post-traumatique, des comportements autodestructeurs, une faible estime de soi, des difficultés à faire confiance aux autres, et enfin, les personnes peuvent être « revictimisées » (Finkelhor, 1990; Kendall-Tackett et al., 1993; Lynskey & Fergusson, 1997; Macmillan et al., 2001; Maniglio, 2009; Mullen, Martin, Anderson, Romans, & Herbison, 1996; Putnam, 2003; Veitch-Wolfe, Gentile, & Wolfe, 1989). Notons que des chercheurs observent le même type de séquelles chez les personnes autochtones (Centre des Premières Nations et Organisation nationale de la santé autochtone [ONSA], 2006; Corrado & Cohen, 2003; Yellow Horse Brave Heart, & DeBruyn, 1998). De plus, les femmes autochtones victimes d'agression sexuelle présenteraient significativement plus de symptômes somatiques, de troubles du sommeil et de problèmes sexuels que leurs homologues caucasiennes (Barker-Collo, 1999). En outre, les résultats d'une étude qualitative réalisée auprès de femmes autochtones ayant été agressées dans l'enfance révèlent que les victimes éprouvent de la culpabilité, un fort sentiment de vulnérabilité, des épisodes dissociatifs, et ont tendance à s'autodéprécier et à avoir honte de leur identité autochtone (McEvoy & Daniluk, 1995).

À la lumière des éléments précités, il apparaît que l'agression sexuelle est un traumatisme pouvant produire des séquelles multiples chez les gens qui en sont la cible. Néanmoins, ces personnes n'empruntent pas toutes la même trajectoire; certaines paraissant s'en remettre mieux que d'autres; elles ont la capacité d'être résilientes.

La résilience

Bien que la résilience soit définie et opérationnalisée différemment selon les études (Daigneault, Cyr, & Tourigny, 2007; Kolar, 2011), deux grandes catégories de définition semblent s'y retrouver : l'une mettant l'accent sur les dimensions psychologiques de l'individu et l'autre y intégrant les interactions de la personne avec son environnement (Muckle & Dion, 2008). Cette dernière catégorie semble pouvoir intégrer le construit de résilience en contexte multiculturel puisqu'elle considère l'interaction des facteurs de risque et de protection selon le contexte et la culture.

Peu de recherches sur la résilience ont été réalisées chez les jeunes autochtones. Mentionnons cependant l'étude de LaFromboise et ses collègues (2006) qui s'est intéressée aux facteurs de résilience chez 212 enfants et adolescents âgés de 10 à 15 ans. La résilience a été mesurée comme un construit multidimensionnel, soit la présence de comportements scolaires pro-sociaux, tels que les attitudes envers l'école, les notes scolaires et l'absence de problèmes de comportements, tels que la consommation d'alcool et de drogues, les comportements externalisés en présence d'adversité à la maison (p. ex. : pauvreté, problèmes de toxicomanie chez les parents). Le sentiment d'appartenance culturelle, la chaleur maternelle, ne pas percevoir de discrimination et le soutien communautaire se sont avérés des facteurs significativement associés à la résilience chez les 126 jeunes vivant en contexte défavorable. Une autre étude portant sur le soutien communautaire et impliquant deux communautés autochtones américaines révèle que ce facteur de protection peut avoir un impact important chez les parents ayant été victimes d'agression sexuelle dans l'enfance, en leur permettant d'éviter qu'ils perpétuent les situations d'abus envers leurs propres enfants (Libby, Orton, Beals, Buchwald, & Manson, 2008). Par ailleurs, il appert que les élèves d'une communauté Mi'Kmaq qui ont été exposé à de la violence, mais qui ont un sens de coopération, de la persévérance, des relations positives avec leur famille et leurs amis, de même qu'une implication dans la communauté, vont vivre moins de symptômes d'intrusion (p. ex. : cauchemars) associés au trouble de stress post-traumatique (Zahradnik et al., 2011).

Ainsi, la résilience n'est pas le fait d'individus invulnérables et ne veut pas dire que les habiletés ayant permis de surmonter avec succès un type de traumatisme seraient généralisables, pour une même personne, à tout autre type de traumatisme (Lemay, 2001). La résilience est davantage envisagée tel un processus, une capacité permettant une adaptation adéquate en dépit de circonstances menaçantes ou d'évènements de vie difficiles (Luthar, Cicchetti, & Becker, 2000; Kolar, 2011). Elle peut également conduire à un potentiel de protection susceptible d'être mobilisé de nouveau (Anaut, 2002).

Depuis, un modèle de la résilience basé sur les facteurs de protection avance que ceux-ci interagissent avec les facteurs de risques pour diminuer les effets nocifs du stress, ce qui aurait un impact significatif quant aux fonctions adaptatives de l'individu (Golse, 2006). Il apparaît donc que la résilience implique une interaction protectrice multifactorielle favorisant l'adaptation, et qu'elle est le résultat d'une co-construction, dans la mesure où elle s'inscrit à travers un échange constant entre l'individu et son environnement, et ce, tout au long de son développement.

Facteurs de protection et résilience

Maintes recherches ont tenté d'identifier les facteurs de protection les plus susceptibles de contribuer à la résilience (Constantine, Benard, & Diaz, 1999; Daigneault et al., 2007; DuMont et al., 2007). Il appert qu'ils sont multiples et impliquent tant l'individu, la famille que la communauté (Drapeau, Saint-Jacques, Lépine, Bégin, & Bernard, 2007; Wolkow & Fergusson, 2001). Parmi ces

facteurs, trois ont été retenus dans le cadre de la présente étude, soit l'estime de soi, la qualité des relations parents-enfants perçue par l'adolescent et la capacité à aller chercher de l'aide dans la communauté. Ce choix est cohérent avec le construit de la résilience qui implique non seulement des facteurs intra-individuels, mais plus largement l'étude des aspects relationnels susceptibles de contribuer à celle-ci. En outre, la dimension communautaire a été intégrée puisqu'elle représente un aspect important dans l'étude de la résilience en contexte multiculturel (Tummala-Narra, 2007).

Estime de soi.

L'estime de soi réfère à la perception qu'une personne entretient quant à sa valeur personnelle (Harter, Whitesell, & Junkin, 1998). Elle se construit à travers certaines relations, dans divers contextes (Harter, Waters, & Whitesell, 1998) et selon un processus dynamique et continu (Jendoubi, 2002). Une estime de soi positive a notamment été associée au bien-être psychologique (Rosenberg, Schoeler, Schoebach, & Rosenberg, 1995) en plus de favoriser les interactions sociales (Chen Yi-Feng, Huang, & Tjosvold, 2008). De même, elle contribue à une plus grande sécurité émotionnelle, une tolérance accrue aux frustrations et permet l'établissement d'un regard plus juste en ce qui concerne les aptitudes et qualités d'un individu (Fortin, 1989).

En outre, elle constitue un facteur de protection en regard de la psychopathologie chez l'adolescent (MacDonald & O'Hara, 1996). À ce titre, l'estime de soi s'est avérée être une caractéristique significative des individus affichant davantage de résilience en contexte de maltraitance (Scott Heller, Larrieu, D'imperio, & Boris, 1999), mais non en contexte de vie difficile chez de jeunes autochtones (Lafromboise et al., 2006). Une recherche longitudinale impliquant 16 adolescentes agressées sexuellement a aussi révélé que l'estime de soi et la cohésion interne des participants s'amélioraient au cours d'une année, tandis qu'en parallèle leurs symptômes diminuaient (Daigneault et al., 2007).

Qualité des relations parents-enfants.

Il semble également qu'un milieu familial soutenant soit vecteur de résilience (Pinkerton & Dolan, 2007). En outre, il permet le développement d'un bien-être psychologique accru en diminuant le risque de troubles psychiatriques (Carlton et al., 2006). En effet, le fonctionnement familial, plus particulièrement la qualité des relations parents-enfants, exerce un effet significatif à long terme sur les capacités d'adaptation et donc de résilience chez les victimes d'agression sexuelle en venant moduler d'éventuelles psychopathologies ou problèmes d'ajustement (Lynskey & Fergusson, 1997). Chez des survivantes d'agression sexuelle, le fonctionnement familial exerce un effet notable sur le sentiment de compétence personnelle dans la gestion du quotidien, sur la qualité des relations interpersonnelles et l'acceptation de soi. Ainsi, la cohésion familiale, soit le soutien parental, la sensibilité et la constance, de même que la présence d'un climat familial conflictuel sont reliées de façon positive et négative, respectivement, au bien-être des participantes (McClure, Chavez, Agars, Peacock, & Matosian, 2008). Ajoutons qu'une étude rétrospective américaine (DuMont et al., 2007) portant sur un échantillon de 676 dossiers d'enfants victimes de maltraitance montre que les victimes ayant grandi dans des conditions familiales stables (avec les deux parents ou lors d'un placement de longue durée) sont significativement plus résilientes à l'adolescence que celles ayant été placées à l'extérieur de leur famille pendant un court laps de temps.

Soutien social et communautaire.

Le soutien communautaire est conçu comme un aspect favorisant l'empowerment (le pouvoir de changement) chez l'individu, ce qui est susceptible de favoriser la résilience. Daigneault et ses collaborateurs (2007) avancent à cet effet que les communautés peuvent être des vecteurs de résilience auprès des victimes d'agression sexuelle à travers la mise en place d'interventions thérapeutiques axées sur le développement de la confiance en soi et du pouvoir de changement. Le soutien communautaire ou social (infrastructures, pairs) protège la personne, car il joue un rôle tampon entre l'événement stressant et ses effets délétères et son expression en termes de santé mentale (Armstrong, Birnie-Lefcovitch, & Ungar, 2005). Par exemple, la présence d'établissements, comme une école ou un centre de loisirs communautaire, où l'on développe les compétences, un sentiment d'appartenance et la détermination sont des facteurs de résilience (Drapeau et al., 2007). De même, le fait pour un adolescent de s'impliquer au sein de sa communauté contribue au développement de ses compétences sociales, de ses capacités de résolution de problème, de son autonomie et de liens significatifs (Kegler et al., 2005; Scales, Benson, Leffert, & Blyth, 2000).

Objectifs de la présente étude

La notion de résilience chez les jeunes victimes d'agression sexuelle ne bénéficie que d'un nombre limité de recherches, bien qu'elle soit sujette à un intérêt croissant (Drapeau et al., 2007). De surcroît, le peu d'études concernant les adolescents autochtones mène à souligner l'importance de travailler à identifier les facteurs de protection qui favorisent la résilience chez ceux ayant été potentiellement victimes d'agression sexuelle. La présente étude a été élaborée en tenant compte de l'histoire et des politiques colonialistes à l'égard des membres des Premières Nations et en collaboration avec des intervenants autochtones, dans le respect de la culture et des traditions autochtones.

L'objectif de la présente étude est d'évaluer l'influence de l'estime de soi, de la qualité de la relation parent-adolescent et de la capacité à chercher de l'aide dans sa communauté sur la résilience psychologique. Notons que l'absence de symptomatologie psychologique sera considérée tel un indicateur de résilience dans la présente étude. Plus précisément, moins l'adolescent présente de symptômes psychologiques, plus il est considéré résilient. En se fondant sur les données trouvées dans la littérature, il est attendu que 1) plus le niveau d'estime de soi augmente, plus la résilience augmente; 2) plus la qualité de la relation de l'adolescent avec ses parents est élevée, plus la résilience augmente; 3) plus l'adolescent a la capacité d'aller chercher ou de recevoir du soutien (social, à l'école, ou communautaire) plus la résilience augmente; et enfin, 4) que les adolescents autochtones auront subi davantage d'agressions sexuelles, et 5) qu'ils auront été exposés à davantage d'événements de vie stressants.

Méthode

Participants et déroulement

La présente étude a été réalisée en avril 2010 auprès de 227 adolescents autochtones et caucasiens habitant au Québec et fréquentant un établissement d'enseignement secondaire situé en milieu défavorisé (MELS, 2011). Huit participants ont été exclus de l'échantillon, car leurs questionnaires comprenaient un nombre élevé de données manquantes. Les participants ont été recrutés par l'intermédiaire de leurs professeurs après avoir reçu au préalable l'autorisation de la direction d'école concernée et une certification éthique. Chaque élève des classes rencontrées a reçu un

questionnaire contenu dans une enveloppe afin d'assurer la confidentialité. Un formulaire de consentement leur a été remis, leur expliquant les modalités de la recherche, ce qui leur a permis de faire un choix libre et éclairé. La collecte de données était entièrement anonyme et ne permettait ainsi en aucun moment l'identification des répondants. Les participants lisaient et parlaient tous le français. La collecte de données s'est déroulée dans la bibliothèque de l'établissement où deux groupes d'élèves se sont présentés à tour de rôle et ont effectué la passation d'une durée approximative de 30 minutes. Des assistants de recherche, ainsi que les responsables de l'étude, étaient disponibles afin de répondre à leurs questions et s'assuraient qu'ils ne parlent pas entre eux.

L'échantillon autochtone était constitué de 61 adolescents (27 %; 46 % de filles). L'âge se situait entre 14 et 17 ans (moyenne d'âge, 15,44 ans, ÉT= 1,02) et 85 % vivaient avec un de leurs parents ou avec les deux. L'ensemble des cycles secondaires a été représenté avec en plus près de 20 % étaient en cheminement particulier. L'échantillon caucasien était quant à lui constitué de 166 adolescents (73 %; 48 % de filles) âgés de 14 à 17 ans (moyenne d'âge 15,98 ans, ÉT= 0,74) et dont 99 % vivaient avec l'un de leurs parents ou chez les deux. L'ensemble des cycles secondaires était représenté et aucun n'était en cheminement particulier.

Instruments de mesure utilisés

Six instruments de mesure furent employés dans le cadre de cette étude, afin d'évaluer les liens entre certaines caractéristiques personnelles et environnementales et la résilience. Un questionnaire sociodémographique a aussi permis d'obtenir un profil sociodémographique des adolescents. Afin de déterminer le statut des participants, une question sur l'appartenance culturelle a été incluse. Les participants autochtones devaient préciser leur lieu de résidence et celui de leurs parents, de même qu'ils devaient indiquer leur langue maternelle. Enfin, une question visant à évaluer spécifiquement la présence d'agression à caractère sexuel dans l'histoire des participants a été incluse (As-tu eu une relation sexuelle ou subi un geste sexuel ou été forcé à faire un geste sexuel à quelqu'un alors que tu ne voulais pas?)

Une partie du questionnaire « Inventaire de problèmes familiaux » (Thériault, Cyr, & Wright, 1996) a été utilisée afin d'identifier des évènements de vie vécus dans l'enfance et l'adolescence. Il présente 12 évènements où l'adolescent doit indiquer s'il a vécu ou non la situation (p.ex. : violence familiale, séparation, abandon des enfants par un des parents, alcoolisme dans la famille).

Le Trauma Symptom Checklist for Children (TSC-C, Brière, 1989), dans sa version française (Wright & Sabourin, 1996) a permis d'évaluer la symptomatologie psychologique. Il comprend six échelles portant respectivement sur l'anxiété, la dépression, le stress post-traumatique, les préoccupations sexuelles, la dissociation et la colère. Tel qu'employé dans certaines recherches (Elklit, Due, & Christiansen, 2009), le score total obtenu a été utilisé pour évaluer le niveau de détresse psychologique. Ainsi, plus un adolescent affiche un score élevé, plus il présente de symptômes psychologiques et un niveau de détresse élevé et moins il est considéré résilient. Les jeunes âgés de plus de 8 ans répondent aux 54 items à l'aide d'une échelle de fréquence en quatre points (jamais, parfois, souvent, presque toujours). Deux échelles de validité sont incluses afin d'évaluer si l'enfant dénie ou intensifie les symptômes. La structure factorielle, sa validité de convergence et la cohérence interne de la traduction ont été démontrées à la suite d'une étude réalisée auprès de 1556 enfants (Jouvin et al., 2001).

L'échelle d'estime de soi (EES - Rosenberg, 1955, traduction canadienne-française de Vallières & Vallerand, 1990) est un bref questionnaire auto-administré constitué de 10 affirmations couvrant différents aspects de l'estime de soi (p. ex. : Je considère que j'ai au moins autant de valeur que les autres). L'EES comprend une échelle de type Likert en 4 points (de 1 = tout à fait en désaccord à 4 = tout à fait d'accord). Cette échelle possède de bonnes qualités psychométriques comparables à la version originale anglaise. La consistance interne varie de 0,70 à 0,90 et a été évaluée à partir de quatre études portant sur des échantillons d'étudiants de niveau collégial (Vallières & Vallerand, 1990). La fidélité test-retest a quant à elle été jugée équivalente à la version originale (r = 0.84).

L'inventaire des attitudes parentales (Child's Attitude Toward the Mother/Father; Giuli & Hudson, 1977, version francophone abrégée; Pauzé, Toupin, & Déry, 1993) a été utilisé afin d'évaluer la perception qu'a l'adolescent de la qualité des relations qu'il entretient avec chacun de ses parents (ou beaux-parents le cas échéant). Le jeune évalue cette relation en répondant aux 10 items sur une échelle en 5 points (de 1 = rarement ou jamais à 5 = souvent ou tout le temps). Les cohérences internes des versions abrégées de notre échantillon sont adéquates (alpha de cronbach = 0,92 et 0,96 pour les versions mère et père respectivement), et comparables à celles de la version longue anglophone (Hudson, 1992).

La traduction française (Daigneault, 2008) de la sous-échelle « relation avec les autres » du Child and Youth Resilience Measure (CYRM, Ungar & Liebenberg, 2005) a été utilisée pour évaluer le soutien reçu par les pairs (l'alpha de Cronbach de notre échantillon est de 0,55). Il est à noter que l'alpha de la version originale de cette échelle est de 0,76. Cette sous-échelle comprend trois items évalués sur une échelle en cinq points où les participants indiquaient à quel point chaque énoncé leur ressemblait (de 1 = pas du tout à 5 = énormément). Deux items supplémentaires ont permis d'évaluer la capacité de l'adolescent à aller chercher de l'aide dans sa communauté, l'un provenant du CYRM (Sais-tu où aller pour obtenir de l'aide dans ta communauté?) et l'autre étant un item composite permettant de voir si l'adolescent a eu recours à l'aide d'un professionnel à l'école (ex. : psychologue, travailleur social, psychoéducateur).

Stratégies d'analyses

Dans un premier temps, les données ont fait l'objet d'analyses préliminaires afin de vérifier la normalité des données. Des chi-carrés ont ensuite été effectués afin d'évaluer les différences observées concernant les événements de vie entre les deux populations (adolescents autochtones vs caucasiens). Par la suite, des analyses corrélationnelles ont été effectuées dans le but d'évaluer la présence de relations significatives entre les données sociodémographiques, les événements vécus dans l'enfance, l'estime de soi, l'aide et le soutien communautaire et la qualité des relations avec les parents et la résilience psychologique. En outre, ces analyses ont permis de s'assurer de l'absence de problèmes de multicolinéarité avant l'analyse de régression. Une analyse de régression multiple de type séquentiel a donc ensuite été réalisée. Pour cette analyse, toutes les variables indépendantes à l'étude ont été incluses dans le modèle, afin de mieux comprendre leur influence respective sur la résilience.

Résultats

Les résultats des chi-carrés concernant les événements de vie apparaissent au tableau 1 et montrent qu'il y a davantage de précarité financière, d'alcoolisme, de violence conjugale, de violence physique envers les enfants, d'incarcération d'un membre de la famille, et d'abandon d'enfants

Tableau 1. Différences concernant les événements de vie entre les adolescents autochtones et caucasiens

	Autochtones (n= 61) (%)	Caucasiens (n= 166) (%)	Total (n=227) (%)	$\chi 2$
Problèmes d'argent	45,0	28,5	32,9	5,44*
Divorce	44,8	39,9	41,2	0,43
Violence conjugale (physique)	23,3	5,5	10,3	15,04***
Violence conjugale (verbale)	80,0	59,3	25,4	9,79**
Violence physique envers enfants	11,7	3,7	5,8	5,15*
Violence verbale envers enfants	18,3	16,6	17,0	0,10
Incarcération d'un membre de la famille	20,3	6,7	10,3	8,82**
Alcoolisme dans la famille	45,8	21,2	27,7	13,09***
Abandon d'enfants par les parents	15,3	3,0	6,3	11,08***
Recours à l'aide d'un professionnel	41,0	48,8	46,7	1,09
Avoir été agressé(e) sexuellement	11,5	13,9	13,2	0,22

* $p < 0,05$; ** $p < 0,01$; *** $p < 0,001$.

chez les adolescents autochtones. Les résultats sont comparables pour les deux populations en ce qui concerne le divorce, le recours à l'aide d'un professionnel et l'agression sexuelle. En somme, les résultats confirment notre hypothèse voulant que les adolescents autochtones aient vécu plus d'évènements de vie en général, mais non en ce qui concerne plus spécifiquement l'agression sexuelle où les taux sont similaires.

Afin d'évaluer la présence de relations significatives entre les différentes variables à l'étude, des corrélations se sont révélées significatives pour les trois hypothèses de recherche avancées en regard de la résilience considérée sous l'angle du faible niveau de détresse psychologique (TSC-C). Ainsi, l'estime de soi semble liée négativement à la détresse psychologique, donc plus l'estime de soi des adolescents est élevée, moins il y a de détresse psychologique. Les résultats suggèrent également que la qualité des relations avec les parents est associée à une meilleure santé psychologique. Ainsi, des relations adéquates avec la mère ou le père sont associées positivement à l'absence de détresse psychologique. Enfin, la capacité de l'adolescent à rechercher de l'aide dans sa communauté, de même que le soutien des amis présentent une relation négative avec la détresse psychologique. Toutefois, le fait de recevoir de l'aide professionnelle est associé à davantage de détresse psychologique chez les adolescents. Par ailleurs, être autochtone est relié à un niveau plus faible d'estime de soi et à plus d'évènements de vie.

Les résultats de l'analyse de régression (voir tableau 3) indique que six principaux facteurs sont significatifs et expliquent 34 % (R2 ajusté) de la variance observée, à savoir, en ordre d'importance, l'estime de soi (β = -0,29), avoir vécu une agression sexuelle (β = -0,23), le nombre d'événements de vie négatifs (β = 0,15), l'aide communautaire (β = -0,13), être d'origine autochtone (β = -0,13) et enfin le sexe de l'adolescent (β = 0,13). Les résultats indiquent donc que l'estime de soi et la capacité à aller chercher de l'aide dans la communauté sont les facteurs de protection les plus susceptibles de contribuer à la résilience lorsque les autres variables sont contrôlées. Par ailleurs, les résultats suggèrent que le fait d'être de sexe féminin, d'avoir subi une agression sexuelle et

Tableau 2. Corrélations des variables à l'étude

Variables	1	2	3	4	5	6	7	8	9	10
1. TSC-C	_									
2. Estime de soi	-.41***	_								
3. Soutien mère	-.24***	.24***	_							
4. Soutien père	-.26***	.23**	.42***	_						
5. Soutien pairs	-.14*	.22**	.29***	-.31***	_					
6. Aide professionnelle	.26***	-.16*	-.08	-.13*	-.04	_				
7. Aide communautaire	-.22**	.18**	.17**	.17*	.19**	.04	_			
8. Évènements de vie	.33***	-.23***	-.24***	-.35***	-.14*	.18**	-.15*	_		
9. Agression sexuelle	.35***	-.05	.00	-.12	-.01	.23**	-.06	.22**	_	
10. Sexe	.17*	-.03	.16*	-.02	.28***	.18**	.13*	.05	.18**	_
11. Origine autochtone	-.03	-.15*	-.09	-.09	.03	.07	-.05	.22**	-.04	-.02

* p < 0,05; ** p < 0,01; *** p < 0,001.

Tableau 3. Analyses de régression multiple de type séquentiel des facteurs exerçant une influence sur la détresse psychologique (résilience)

	B	ET(B)	Beta(β)	t	Sig
Étape 1					
Sexe	3,92	2,20	0,11	1,78	0,08
Origine autochtone	-3,36	2,53	-0,08	-1,33	0,19
Nb. événements de vie	5,67	1,25	0,29	4,53***	0,00
Agression sexuelle	14,25	3,42	0,26	4,17***	0,00
Étape 2					
Sexe	4,64	2,15	0,13	2,16*	0,03
Origine autochtone	-5,51	2,34	-0,13	-2,38*	0,02
Nb. événements de vie	3,01	1,22	0,15	2,47*	0,01
Agression sexuelle	12,46	3,16	0,23	3,94***	0,00
Estime de soi	-1,01	0,21	-0,29	-4,94***	0,00
Soutien mère	-0,10	0,05	-0,11	-1,79	0,07
Soutien père	-0,03	0,05	-0,04	-0,61	0,54
Soutien pairs	-0,05	0,53	-0,01	-0,10	0,92
Aide professionnelle	3,97	2,11	0,11	1,89	0,06
Aide communautaire	-1,97	0,90	-0,13	-2,20*	0,03

R 2 ajusté=0,34*** ; * p < .05; ** p < .01; *** p < .000

d'avoir été exposé à plusieurs événements stressants constituent des facteurs de risques reliés à une moins grande résilience. Enfin, le statut autochtone s'avère négativement corrélé avec le niveau de détresse lorsque les autres variables de l'étude sont contrôlées, alors que le soutien reçu des parents et des pairs, de même que l'aide professionnelle ne sont plus liés à la détresse psychologique rapportée.

Discussion

L'objectif principal de cette recherche portait sur l'étude de facteurs de protection susceptibles d'exercer une influence positive sur la résilience psychologique. Ainsi, tel qu'attendu, les résultats des analyses corrélationnelles se sont avérés significatifs pour quatre des cinq hypothèses avancées. Une analyse de régression séquentielle a permis de retenir l'estime de soi comme facteur le plus significatif en regard de la résilience. Certaines variables furent aussi considérées en tant que facteurs de risque potentiels.

Évènements de vie et agression sexuelle

Les résultats obtenus révèlent que les adolescents autochtones de notre échantillon sont exposés à davantage de problèmes psychosociaux que les adolescents caucasiens, ce qui correspond aux constats avancés dans d'autres recherches (Blackstock & Trocmé, 2004; Brownridge, 2003; Kirmayer, Brass, & Tait, 2000). Toutefois, les résultats indiquent qu'il n'y a pas de différence significative en regard de la prévalence de l'agression sexuelle entre les deux populations, ce qui semble aller à l'encontre de résultats récemment présentés par Collin-Vézina et ses collègues (2009). Cependant, on peut penser que la taille réduite de l'échantillon autochtone dans la présente étude limite la portée des résultats. Outre les facteurs de sous-dévoilement communs aux personnes agressées sexuellement, certains aspects pouvant s'avérer plus délicats en contexte autochtone pour des raisons historiques (p. ex. : méfiance envers le système de justice), socioculturelles (p. ex. : famille élargie) et parfois géographiques (p. ex. : isolement et manque de ressources) pourraient expliquer les résultats. Ainsi, la culpabilité ressentie ou la peur d'exposer un proche à la justice, la crainte de mettre en péril l'unité familiale, et enfin les représailles éventuelles par des gens de la communauté sont toujours possibles (Native Women's Association of Canada [NCWA], 1994; Picard, 2004). D'autre part, on peut aussi émettre l'hypothèse que la situation géographique de la communauté autochtone d'où provenaient les participants, notamment la proximité de la réserve avec d'autres agglomérations urbaines, a pu exercer une influence positive : permettre dans certains cas, contrairement aux réserves éloignées, une accessibilité accrue à l'obtention de services d'aide et de conseils pour les familles en difficulté. Ajoutons que notre échantillon autochtone fréquentait un établissement scolaire, un lieu qui peut s'avérer un agent de prévention et de sensibilisation quant à la problématique liée à l'agression sexuelle. Enfin, il est aussi possible que l'agression sexuelle soit moins présente chez les personnes autochtones plus jeunes que chez les plus âgés, qui pour leur part furent exposées au traumatisme du régime des pensionnats. Néanmoins, il importe que d'autres études soient réalisées auprès d'échantillons plus vastes et dans diverses communautés, afin d'obtenir un meilleur estimé de la prévalence de l'agression sexuelle en milieu autochtone.

Facteurs de risque et résilience

Les résultats de la régression suggèrent que plusieurs facteurs affectent la résilience. À ce titre, les résultats obtenus semblent démontrer que les adolescentes de l'échantillon seraient moins

résilientes, ce qui pourrait révéler un impact en regard du sexe. Ainsi, les résultats sont similaires à plusieurs recherches précédentes indiquant que les filles présentent davantage de détresse psychologique que les garçons (Ayotte, Fournier, & Riberdy, 2009; Hong, 1995; Picard, Claes, Melançon, & Miranda, 2007), mais contraires à ceux obtenus par Lafromboise et al. (2006) auprès d'adolescents plus jeunes et où le sexe n'était pas relié à la résilience. Il faut toutefois considérer ici la définition de la résilience restreinte aux seuls symptômes psychologiques, ce qui peut conduire à des inférences erronées. De plus, il est possible que notre mesure de symptômes n'ait pas pu détecter ces différences, notamment parce que les garçons présentent plus souvent des problèmes externalisés qu'internalisés (p. ex. : Leadbeater, Kuperminc, Blatt, & Hertzog, 1999). Il est également possible que les garçons avouent plus difficilement leur détresse psychologique que les filles (Dumont, 2000), ce qui expliquerait pourquoi ils semblent plus résilients dans notre échantillon. En outre, les exigences sociales et émotionnelles survenant durant l'adolescence peuvent être particulièrement éprouvantes pour les filles autochtones, qui se retrouvent alors plus souvent dans des situations à risque, pouvant ainsi compromettre leur confiance en leur capacité à surmonter les difficultés (Lafromboise et al., 2006).

Le fait d'avoir vécu plusieurs évènements stressants constitue un risque d'être moins résilient. En effet, ces résultats confirment ceux de DuMont et ses collègues (2007) indiquant que les gens plus résilients ont été moins fréquemment en contact avec des situations stressantes que ceux affichant un niveau de résilience moindre. De plus, les résultats des analyses révèlent que l'agression sexuelle est un évènement de vie qui exerce une influence plus importante que le nombre d'évènements de vie difficiles. L'impact d'une agression sexuelle sur le fonctionnement d'un individu pourrait donc être plus néfaste que d'autres types d'évènements de vie. D'ailleurs, les résultats d'une étude longitudinale récente indiquent qu'au cours de l'enfance, l'agression sexuelle a un effet plus délétère que l'agression physique sur la santé psychologique à l'âge adulte (Fergusson, Boden, & Horwood, 2008).

La corrélation entre le statut autochtone et la résilience s'est avérée non significative. Toutefois, les résultats de l'analyse de régression montrent que les adolescents autochtones présentent davantage de résilience que les adolescents non-autochtones. Les jeunes autochtones de l'échantillon ont été davantage exposés aux événements de vie délétères que leurs homologues caucasiens, en plus de présenter une estime de soi un peu plus faible, ce qui pourrait expliquer pourquoi la relation entre le statut autochtone et la résilience ne ressort pas lorsque le nombre d'évènements de vie et l'estime de soi ne sont pas contrôlés. Ainsi, lorsque les variables indépendantes de notre étude sont contrôlées dans l'analyse de régression, l'effet du statut autochtone ressort (ce qu'on appelle un effet de suppression, Mackinnon, Krull, & Lockwood, 2000). D'autres études seront nécessaires afin de mieux comprendre ce qui fait que les adolescents autochtones s'avèrent un peu plus résilients que leurs homologues caucasiens. On peut penser que certains facteurs culturels (non mesurés) propres aux personnes autochtones pourraient avoir exercé une influence positive sur la résilience : par exemple le sentiment d'appartenance culturelle (Lafromboise et al., 2006), la spiritualité, ou la pratique de rites de guérison, des dimensions liées à la notion de cercle sacré (Chansonneuve, 2005), un symbole influant et reconnu au sein des cultures autochtones (Muckle & Dion, 2008).

Facteurs de protection et résilience

Les corrélations concernant les liens possibles entre l'estime de soi et le soutien parental et social en regard de la résilience se sont révélées statistiquement significatives, tel qu'avancé par les

études précédentes sur la résilience (Libby et al., 2008; Scott Heller et al., 1999). Ces facteurs ont ensuite été intégrés dans un modèle de régression qui révèle que l'estime de soi est le facteur qui exerce l'influence la plus significative sur la résilience chez les adolescents de l'étude. Ces résultats sont conformes à ceux d'une autre étude proposant que l'estime de soi favorise la résilience en exerçant un effet modérateur sur le stress généré par des événements de vie délétères (Neighbors, Forehand, & McVicar, 1993). De plus, une meilleure estime de soi favoriserait l'emploi de meilleures stratégies d'ajustement tout en augmentant la confiance en soi, améliorant ainsi les capacités à réagir face à l'adversité (Dumont & Provost, 1999; Thoits, 1995).

Les résultats obtenus semblent aussi démontrer que la perception de la qualité des relations parentales n'est pas reliée à la résilience lorsqu'on prend en compte d'autres facteurs, bien que la qualité de la relation avec la mère soit marginalement significative. Pourtant, Goldstein et Brooks (2005) expliquent qu'un style parental soutenant fait de réciprocité, de chaleur et de compréhension serait un facteur de résilience en favorisant un sentiment de compétence personnelle et sociale. Ces mêmes auteurs ajoutent que cela pourrait avoir un impact sur les facteurs de risques affectant la santé mentale. Les résultats obtenus pourraient s'expliquer par le fait que les adolescents se situent dans une étape développementale souvent caractérisée par un certain détachement envers leurs parents, ce qui peut être lié à des aspects à la fois identitaires, mais relevant aussi de l'exploration de nouveaux rôles sociaux (Cloutier & Drapeau, 2008). Dans le cadre de la présente étude, une mesure de la qualité de la relation a été utilisée plutôt que d'autres types de mesure, tel le soutien parental, ce qui a également pu influencer les résultats. Il serait donc intéressant d'utiliser plus d'une mesure de la relation parent-enfant (qualité, soutien, attachement, etc.) afin de mieux comprendre l'influence de cette variable sur la résilience.

La capacité à rechercher le soutien disponible dans la communauté peut également contribuer à la résilience. Ainsi, comme avancé dans d'autres recherches, cette variable serait associée à un meilleur ajustement psychologique et contribuerait à la résilience (Armstrong et al., 2005; Horton & Wallander, 2001). À cet effet, la disponibilité des ressources, de même que la manière dont les adolescents emploient celles-ci sont d'ailleurs des variables susceptibles de favoriser un développement sain par opposition à l'apparition de problèmes psychologiques (Compas, 1987). Ces dernières variables n'ont pas été étudiées dans le cadre de la présente étude. En effet, c'est la capacité de l'adolescent à chercher du soutien qui a été évaluée, ce qui ne permet pas de savoir si des ressources sont disponibles, ou encore comment elles sont utilisées. Par ailleurs, la présente étude a mesuré l'aspect communautaire avec l'aide d'une seule question. Cette dimension gagnerait donc à être évaluée de manière plus élaborée, d'autant plus qu'elle revêt de l'importance pour les peuples autochtones (Muckle & Dion, 2008), par exemple en évaluant la participation culturelle, l'identité culturelle, ou encore la discrimination raciale. Enfin, seulement quelques énoncés de la mesure de résilience (CYRM) ont été utilisés dans le cadre de la présente étude pour évaluer le soutien social et communautaire. Il serait important que des études futures l'utilisent dans sa version complète lorsque la validation française sera terminée et que nous aurons plus de données quant à sa validité discriminante et prédictive en regard des aspects culturels de la résilience.

Alors que les résultats des corrélations montraient une association entre le soutien par les pairs et la résilience, l'analyse de régression révèle que cette variable n'est plus significative. Ainsi, l'estime de soi et la capacité à rechercher du soutien dans sa communauté semblent des facteurs de protection ayant plus d'impact sur la résilience. Étant donné que les relations avec les pairs représentent une dimension importante à l'adolescence, il serait important d'en évaluer l'influence sur la résilience à l'aide de mesures plus variées. En effet, il est plausible que l'échelle employée

dans le cadre de la présente étude n'ait pu permettre d'évaluer de façon adéquate le soutien reçu par les pairs en raison du fait qu'elle était trop restreinte et ne couvrait qu'un seul aspect.

Contrairement à ce qui était attendu, les résultats concernant l'aide professionnelle reçue à l'école se sont révélés associés à davantage de détresse psychologique. Cela semble indiquer que l'aide professionnelle reçue ne pourrait être conceptualisée en tant que facteur de résilience dans la présente étude. Néanmoins, ces résultats sont cohérents dans la mesure où les gens consultent habituellement un professionnel lorsqu'ils éprouvent des symptômes. Ces résultats peuvent cependant être le fait du schème transversal employé qui ne considère qu'un temps de mesure. À cet effet, les résultats indiquent néanmoins que les adolescents éprouvant des difficultés psychosociales ont recours à l'aide des professionnels. Ainsi, il serait intéressant d'évaluer à plus long terme si les adolescents qui ont reçu de l'aide présentent, après que l'intervention soit terminée, moins de symptômes, ce qui pourrait alors signifier que l'aide reçue a été bénéfique et susceptible de contribuer à la résilience.

Limites de l'étude

Les limites de la présente étude ont d'une part trait à l'opérationnalisation de la résilience qui n'a pu permettre d'en saisir toute la complexité puisqu'elle ne considère que l'aspect symptomatologique. De plus, la nature transversale ainsi que le devis corrélationnel ne nous permettent au mieux que des inférences quant à l'influence exercée par chacune des variables en regard de la résilience. Enfin, le nombre d'adolescents autochtones et la faible proportion de victimes d'agression sexuelle de notre échantillon limitent la portée des résultats. En dépit de ces limites, cette étude présente un intérêt certain, puisqu'elle est une des rares à soumettre des résultats de type quantitatifs à partir d'un échantillon d'adolescents autochtones.

Conclusion

Les résultats de la présente étude correspondent aux connaissances actuelles avancées dans la recherche sur la résilience et suggèrent l'importance d'utiliser une approche écosystémique qui implique non seulement les facteurs individuels, mais aussi les transactions avec l'environnement. En effet, les résultats obtenus semblent congruents avec la recherche actuelle puisque l'estime de soi et le soutien communautaire se sont avérés significatifs. En effet, tel qu'avancé par d'autres chercheurs, ces facteurs sont associés au bien-être psychologique, favorisent les interactions sociales, contribuent à une plus grande sécurité émotionnelle et protègent la personne des effets délétères et de leur expression sur le plan de la santé mentale (Armstrong et al., 2005; Chen Yi-Feng et al., 2008; Rosenberg et al., 1995). À la lumière des analyses obtenues, on peut donc penser que l'estime de soi est un important facteur de protection pour une trajectoire résiliente. Ainsi, des interventions en amont visant à améliorer l'estime de soi, à promouvoir la qualité des relations avec les parents et l'initiative des adolescents à utiliser le soutien disponible dans leur environnement seraient susceptibles de contribuer à la résilience en diminuant la détresse psychologique. Néanmoins, les résultats obtenus doivent aussi être nuancés, les trajectoires résilientes pouvant être multiples en raison du fait qu'il s'agit d'un processus dynamique et complexe (Anaut, 2002; Lemay, 2001; Luthar et al., 2000).

Les résultats présentés nous incitent aussi à souligner l'importance d'investir davantage dans la recherche afin de poursuivre les efforts de compréhension du processus résilient et des facteurs susceptibles d'en favoriser l'accroissement, notamment chez les victimes d'agression sexuelle

en milieu autochtone. En effet, la violence sexuelle chez les peuples autochtones est complexe, et devrait faire l'objet d'une approche sensible aux dimensions à la fois historiques, sociales, politiques et culturelles (Muckle & Dion, 2008). Ainsi en contexte multiculturel, et en particulier chez les personnes autochtones, une approche clinique des traumatismes, des évènements de vie et de leurs impacts, qui s'oriente habituellement sur le fonctionnement individuel, gagnerait à intégrer les systèmes communautaires en adoptant une perspective de la résilience qui soit écologique (Blackstock & Trocmé, 2004; McCubbin, McCubbin, Thompson, & Thompson, 1998; Tummala-Narra, 2007).

Remerciements

Les auteurs souhaitent remercier (Tshinashkumitin) tous les adolescents et adolescentes qui ont bien voulu participer à cette étude en acceptant de partager plusieurs aspects de leur vie personnelle. Merci également à monsieur Bouchard, directeur enthousiaste, qui nous a ouvert les portes de son établissement d'enseignement, de même que les enseignants de cette école. Nous remercions les assistantes de recherche, notamment Marie-Frédéric Bouchard et Delphine Lagacé, de même que les intervenants autochtones pour leur précieuse collaboration à ce projet. Cette étude a été réalisée dans le cadre des recherches du Centre de recherche interdisciplinaire sur les problèmes conjugaux et les agressions sexuelles (CRIPCAS). Elle a été réalisée avec le soutien financier de l'Université du Québec à Chicoutimi, par le biais du programme d'aide institutionnel à la recherche, octroyé à la 2ème auteure.

Références

Anaut, M. (2002). Trauma, vulnérabilité et résilience en protection de l'enfance. *Connexions*, 1, 101-118.

Armstrong, M. I., Birnie-Lefcovitch, S., & Ungar, M. T. (2005). Pathways between social support, family well being, quality of parenting and child resilience : What we know. *Journal of Child and Family Studies*, 14, 269-281.

Ayotte, V., Fournier, M., & Riberdy, H. (2009). La détresse psychologique des enfants et des adolescents montréalais... l'expression de différentes réalités? Montréal : Direction de santé publique de l'agence de la santé et des services sociaux de Montréal.

Barker-Collo, S. L. (1999). Reported symptomatoly of native Canadian and Caucasian females sexually abused in childhood: A comparison. *Journal of Interpersonal Violence*, 14, 747-759.

Blackstock, C., & Trocmé, N. (2004). *Community based child welfare for aboriginal children: Supporting resilience through structural change*. Toronto: First Nations Child and Family Caring Society et Centre of excellence for Child Welfare.

Brave Heart, M. Y. H., & DeBruyn, L. M. (1998). The American Indian holocaust: Healing historical unresolved grief. *The Journal of the National Center*, 8, 60-82.

Brière, J. (1989). *Trauma symptom checklist for children* (TSC-C). Los Angeles, CA: University of Southern California Press.

Brownridge, D. A. (2003). Male partner violence against Aboriginal women in Canada: An empirical analysis. *Journal of Interpersonal Violence*, 18, 65-83.

Carlton, B. S., Goebert, D. A., Miyamoto, R. H., Andrade, N. N., Hishinuna, E. S., Makini, G. K., et al. (2006). Resilience, family adversity and well-being among Hawaiian and non-Hawaiin adolescents. *International Journal of Social Psychiatry*, 52, 291-308.

Centre des Premières Nations et Organisation nationale de la santé autochtone. (2006). *Enquête régionale longitudinale sur la santé des Premières Nations* (ERS) 2002 – 2003. Le rapport pour les peuples. Ottawa.

Centre national d'information sur la violence dans la famille. (2006). *Abus sexuel à l'égard des enfants*. Récupéré le 5 septembre 2008 de http://www.phac-aspc.gc.ca/nc-cn/.

Chansonneuve, D. (2005). *Retisser nos liens : Comprendre les traumatismes vécus dans les pensionnats indiens par les Autochtones*. Ottawa : Fondation autochtone de guérison.

Chen Yi-Feng, N., Huang, X., & Tjosvold, D. (2008). Similarity in gender and self-esteem for supportive peer relationships: The mediating role of cooperative goals. *Journal of Applied Social Psychology*, 38, 1147-1178.

Cloutier, R., & Drapeau, S. (2008). *Psychologie de l'adolescence, 3e édition*. Québec : Gaëtan Morin éditeur.

Collin-Vézina, D., Dion, J., & Trocmé, N. (2009). Sexual abuse in Canadian Aboriginal communities: A comprehensive review of conflicting evidence. *Pimatisiwin: A Journal of Aboriginal and Indigenous Community Health*, 7, 27-47.

Commission Royale sur les Peuples Autochtones, Dussault, R., Erasmus, G., Chartrand, P. L. A. H., Meekison, J. P., Robinson, V., Sillett, M. et al. (1996). *Rapport de la commission royale d'enquête sur les peuples autochtones*. Affaires indiennes et du Nord Canada.

Compas, B. E. (1987). Coping with stress during childhood and adolescence. *Psychological Bulletin*, 100, 393-403.

Constantine, A. N., Benard, B., & Diaz, M. (1999). *Measuring protective factors and resilience traits in youth: The healthy kids resilience assessment*. Paper presented at the Seventh annual meeting of the society for prevention research.

Corrado, R. R., & Cohen, I. M. (2003). *Profils de la santé mentale d'un échantillon d'Autochtones de la Colombie-Britannique survivants du régime canadien des pensionnats*. Ottawa : Fondation autochtone de guérison.

Daigneault, I. (2008). Traduction française du Child and Youth Resilience Measure (CYRM). Université de Montréal.

Daigneault, I., Cyr, M., & Tourigny, M. (2007). Exploratory of recovery trajectories and associated factors in sexually abused adolescents. *Journal of Aggression, Maltreatment and Trauma,*14, 164-184.

Daigneault, I., Hébert, M., & Tourigny, M. (2007). Personal and interpersonal characteristics related to resilient developmental pathways of sexually abused adolescents. *Child and Adolescents Psychiatric Clinics of North America*, 16, 415-434.

Drapeau, S., Saint-Jacques, M.-C., Lépine, R., Bégin, G., & Bernard, M. (2007). Processes that contribute to resilience among youth in foster care. Journal of Adolescence, 30, 977-999.

Dumont, M., & Provost, M. A. (1999). Resilience in adolescents: Protective role of social support, coping strategies, self-esteem, and social activities on experience of stress and depression. *Journal of Youth and Adolescence*, 28, 343-363.

DuMont, K. A., Widom, S. C., & Czaja, J. S. (2007). Predictors of resilience in abused and neglected children grown-up: The role of individual and neighborhood characteristics. *Child Abuse & Neglect*, 31, 255-272.

Dumont, M. (2000). Expérience du stress à l'adolescence. *Journal International de Psychologie*, 35, 194-206.

Elklit, A., Due, L., & Christiansen, D. M. (2009). Predictors of acute stress symptoms in rape victims. *Traumatology*, 15, 38-45.

Fergusson, D. M., Boden, J. M., & Horwood, J. L. (2008). Exposure to childhood sexual and physical abuse and adjustment in early adulthood. *Child Abuse and Neglect*, 32, 607-619.

Finkelhor, D. (1990). Early and long-term effects of child sexual abuse: An update. *Professional Psychology: Research and Practice*, 21, 325-330.

Fortin, B. (1989). Ce que vous devez savoir sur l'estime de soi. Association canadienne pour la santé mentale : Outaouais.

Giuli, C. A., & Hudson, W. W. (1977). Assessing parent-child relationship disorders in clinical practice: The child's point of view. *Journal of Social Service Research*, 1, 77-92.

Goldstein, S., & Brooks, R. B. (2005). *Resilience in children*. New York: Springer.

Golse, B. (2006). La résilience: Concept utile ou concept valide? *Archives de pédiatrie*, 13, 1354-1357.

Harter, S., Waters, P., & Whitesell, N. R. (1998). Relational self-worth: Differences in perceived worth as a person across interpersonal contexts among adolescents. *Child Development*, 69, 756-766.

Harter, S., Whitesell, N. R., & Junkin, L. J. (1998). Similarities and differences in domain-specific and global self-evaluations of learning-disabled, behaviorally disordered, and normally achieving adolescents. *American Educational Research Journal*, 35, 653-680.

Hong, Z.-R., McCarthy, P., & Lawrenz, F. (2005). Psychosocial predictors of psychological distress in Taiwanese secondary school boys and girls. *Sex Roles*, 53(5/6), 419-431.

Horton, V., & Wallander, J. L. (2001). Hope and social support as resilience factors against psychological distress of mothers who care for children with chronic physical conditions. *Rehabilitation Psychology*, 46, 382-399.

Hudson, W. W. (1992). Child's attitude toward father and mother scales. *The WALMYR Assessment Scales Scoring Manual*. Tempe, AZ: WALMYR.

Jendoubi, V. (2002). *Estime de soi et éducation scolaire*. République et canton de Genève : Service de la recherche en éducation.

Jiwani, Y., Gorkoff, K., Berman, H., Taylor, G., Vardy-Dell, G., & Normandeau, S. (1999). *Violence Prevention and the Girl Child: Phase One Report*. Vancouver, BC: The Alliance of Five Research Centres on Violence.

Jouvin, E., Cyr, M., Thériault, C., & Wright, J. (2001). *Étude des qualités psychométriques de la traduction française du Trauma Symptom Checklist for Children* (TSC-C). Document inédit, Université de Montréal.

Kegler, M., Oman, R., Vesely, S., McLeroy, K., Aspy, C., Rodine, S., et al. (2005). Relationships among youth assets and neighborhood and community resources. *Health, Education and Behavior*, 32, 380-397.

Kendall-Tackett, K. A., Williams, L. M., & Finkelhor, D. (1993). Impact of sexual abuse on children: A review and synthesis of recent empirical studies. *Psychological Bulletin*, 113, 164-180.

Kirmayer, L. J., Brass, G. M., & Tait, C. L. (2000). The mental health of aboriginal peoples: Transformations of identity and community. *Canadian Journal of Psychiatry*, 45, 607-616.

Kolar, K. (2011). Resilience: Revisiting the Concept and its Utility for Social Research. *International Journal of Mental Health and Addiction*, 9, 421–433.

LaFromboise, T. D., Hoyt, D. R., Oliver, L., & Whitbeck, L. B. (2006). Family, community, and school influences on resilience among American Indian adolescents in the upper Midwest. *Journal of Community Psychology*, 34, 193-209.

Leadbeater, B. J., Kuperminc, G. P., Blatt, S. J., & Hertzog, C. (1999). A multivariate model of gender differences in adolescents' internalizing and externalizing problems. *Developmental Psychology*, 35, 1268–1282.

LeClair, M., & Associates. (1996). *Profile of Aboriginal Sex Offenders*. Ottawa, ON: Correctional Service Canada.

Lemay, M. (2001). La résilience devant la violence. *Revue québécoise de psychologie*, 22, 135-148.

Levan, M. B. (1989). *Report on Child Sexual Abuse Needs Assessment*. Paper presented at the Communities' Voice on Child Sexual Abuse. Yellowknife, NWT.

Libby, A. M., Orton, H. D., Beals, J., Buchwald, D., & Manson, S. M. (2008). Childhood abuse and later parenting outcomes in two American Indian tribes. *Child Abuse & Neglect*, 32, 195-211.

Luthar, S. S., Cicchetti, D., & Becker, B. (2000). The construct of resilience: A critical evaluation and guidelines for future work. *Child Development*, 71, 543-562.

Lynskey, M. T., & Fergusson, D. M. (1997). Factors protecting against the development of adjustment difficulties in young adults exposed to childhood sexual abuse. *Child Abuse & Neglect*, 21, 1177-1190.

Mackinnon, D. P., Krull, J. L. & Lockwood, C. M. (2000). Equivalence of the mediation, counfounding and suppression effect. *Prevention Science*, 1, 173.

MacDonald, G., & O'Hara, K. (1996). *Ten elements of mental health, its promotion and demotion: Implications for practice*. Birmingham, United Kingdom: Society of Health Education & Health Promotion Specialists.

MacMillan, H. L., Fleming, J. E., Streiner, D. L., Lin, E., Boyle, M. H., Jamieson, E., et al. (2001). Childhood abuse and lifetime psychopathology in a community sample. *American Journal of Psychiatry,* 158, 1878-1883.

Maniglio, R. (2009). The impact of child sexual abuse on health: A systematic review of reviews. *Clinical Psychology Review*, 29, 647-657.

McClure, F. H., Chavez, D. V., Agars, M. D., Peacock, J. M., & Matosian, A. (2008). Resilience in sexually abused women: Risk and protective factors. *Journal of Family Violence*, 23, 81-88.

McCubbin, H. I., McCubbin, M. A., Thompson, A. I., & Thompson, E. A. (1998). Resiliency in ethnic families: A conceptual model for predicting family adjustment and adaptation. In H. I. McCubbin (Éd.), *Resiliency in native American and immigrant families* (pp. 1-46). CA: Thousand Oaks, Sage.

McEvoy, M., & Daniluk, J. (1995). Wounds to the soul: The experiences of aboriginal women survivors of sexual abuse. *Canadian Psychology*, 36, 221-235.

McIvor, S. D., & Nahanee, T. A. (1998). Aboriginal women: Invisible victims of violence. In K. Bonnycastler & G. S. Rigakos (Éds.), *Unsettling Truths: Battered Women, Policy, Politics, and Contemporary Research in Canada* (pp. 63-70). Vancouver, BC: Collective Press.

Ministère de la Justice Canada. (2006a). *Violence ou exploitation sexuelle des enfants et des adolescents : fiche d'information du ministère de la Justice du Canada.* Récupéré le 29 novembre 2010, de http://canada.justice.gc.ca/en/ps/fm.

Ministère de la Justice Canada. (2006b). *Violence ou exploitation sexuelle des enfants et des adolescents : fiche d'information du ministère de la Justice du Canada.* Récupéré le 29 novembre 2010, de http://canada.justice.gc.ca/en/ps/fm.

Muckle, F., & Dion, J. (2008). Les facteurs de résilience et de guérison chez les autochtones victimes d'agression sexuelle. *Revue québécoise de psychologie*, 29, 1-14.

Mullen, P. E., Martin, J. L., Anderson, J. C., Romans, S. E., & Herbison, G. P. (1996). The long-term impact of the physical, emotional, and sexual abuse of children: A community study. *Child Abuse & Neglect*, 20, 7-21.

Neighbors, B., Forehand, R., & McVicar, D. (1993). Resilient adolescents and interparental conflict. *American Journal of Orthopsychiatry*, 63, 462-471.

NWAC. (1994). *Aboriginal women: Police charging policies and domestic violence*. Winnipeg, MB: Native Women's Association of Canada.

Organisation nationale de la santé autochtone (ONSA). (2006). *Enquête régionale longitudinale sur la santé des Premières Nations : Le rapport pour les peuples*. Ottawa : Centre des Premières Nations.

Pauzé, R., Toupin, J., & Déry, M. (1993). *Inventaire des attitudes parentales*. (Translation of the Index of Parental Attitudes). Unpublished manuscript, Université de Sherbrooke.

Pereda, N., Guilera, G., Forns, M., & Gómez-Benito, J. (2009). The prevalence of child sexual abuse in community and student samples: A meta-analysis. *Clinical Psychology Review*, 29, 328-338.

Picard, P. (2004). L'*intervention auprès des Premières Nations : la nécessité d'une approche intégrée*. Québec : Groupe de recherche et d'interventions psychosociales en milieu autochtone (GRIPMA).

Picard, L., Claes, M., Melançon, C., & Miranda, D. (2007). Qualité des liens affectifs parentaux perçus et détresse psychologique à l'adolescence. *Enfance*, 4, 371-392.

Pinkerton, J., & Dolan, P. (2007). Family support, social capital, resilience and adolescent coping. *Child and Family Social Work*, 12, 219-228.

Putnam, F. W. (2003). Ten-year research update review: Child sexual abuse. *Journal of American Academy of Child & Adolescent Psychiatry*, 42, 269-278.

Roos, P. E., & Cohen, L. H. (1987). Sex roles and social support as moderators of life stress adjustment. *Journal of Personality and Social Psychology*, 52, 576-585.

Rosenberg, M., Schooler, C., Schoenbach, C., & Rosenberg, F. (1995). Global self-esteem and specific self-esteem: Different concepts, different outcomes. *American Sociological Review*, 60, 141-156.

Scales, P. C., Benson, P., Leffert, N., & Blyth. (2000). Contribution of developmental assets to the prediction of thriving among adolescents. *Applied Developmental Science*, 4, 27- 46.

Scott-Heller, S., Larrieu, J. A., D'Imperio, R., & Boris, N. W. (1999). Research on resilience to child maltreatment: Empirical considerations. *Child Abuse & Neglect*, 23, 321-338.

Seery, M. D., Holman, A. E., & Cohen- Silver, R. (2010). Watever does not kill us: Cumulative lifetime adversity, vulnerability, and resilience. *Journal of Personality and Social Psychology,* 99, 1025-1041.

Stoltenborgh, M., Van IJzendoorn, M. H., Euser, E. M., & Bakermans-Kranenburg, M. J. (2011). A global perspective on child abuse: Meta-analysis of prevalence around the world. *Child Maltreatment*, 26, 79-101.

Thériault, C., Cyr, M., & Wright, J. (1996). *Traduction et adaptation des problèmes familiaux vécus avant l'âge adulte de Courtois* (1988). Document inédit : Université de Montréal.

Thoits, P. A. (1995). Stress, coping and social support processes: What are we? What next? *Journal of Health and Social Behavior*, 35, 53-79.

Tourigny, M., Gagné, M.-H., Joly, J., & Chartrand, M.-E. (2006). Prévalence et cooccurrence de la violence envers les enfants dans la population québécoise. *Revue canadienne de santé publique*, 2, 109-113.

Tourigny, M., Hébert, M., Joly, J., Cyr, M., & Baril, K. (2008). Prevalence and co-occurrence of violence against children in the Quebec population. *Australian and New Zealand Journal of Public Health*, 32, 331-335.

Trocmé, N., & Wolfe, D. (2001). *Maltraitance des enfants au Canada : Résultats choisis tirés de l'Étude canadienne sur l'incidence des signalements de cas de violence et de négligence envers les enfants*. Ottawa : Ministre des Travaux publics et Services gouvernementaux.

Tummala-Narra, P. (2007). Conceptualizing trauma and resilience across diverse contexts: A multicultural perspective. *Journal of Aggression, Maltreatment & Trauma*, 14, 33-53.

Ungar, M., & Liebenberg, L. (2005). The International Resilience Project: A mixed methods approach to the study of resilience across cultures. In M. Ungar (Éd.), *Handbook for working with children and youth: Pathways to resilience across cultures and contexts*. Thousand Oaks, CA: Sage.

Vallieres, E. F., & Vallerand, R. J. (1990). Traduction et validation canadienne-française de l'échelle de l'estime de soi de Rosenberg. *International Journal of Psychology*, 25, 305-316.

Veitch-Wolfe, V., Gentile, C., & Wolfe, D. A. (1989). The impact of sexual abuse on children: A PTSD formulation. *Behavior Therapy*, 20, 215-228.

Wolkow, K. E., & Ferguson , B. H. (2001). Community factors in the development of resiliency: Considerations and future directions. *Community Mental Health Journal*, 37, 489-498.

Wright, J., & Sabourin, S. (1996). *Traduction du Trauma Symptom Checklist for Children* (TSC-C) (Briere, 1989). Document inédit, Université de Montréal.

Yellow Horse Brave Heart, M., & DeBruyn, L. M. (1998). The American Indian holocaust: Healing historical unresolved grief. *The Journal of the National Center*, 8, 60-82.

Zahradnik, M., Stewart, S. H., O'Connor, R. M., Stevens, D., Ungar, M., & Wekerle, C. (2010). Resilience moderates the relationship between exposure to violence and posttraumatic reexperiencing in Mi'kmaq youth. *International Journal of Mental Health and Addiction*, 8, 408-420.

First Peoples Child & Family Review
An Interdisciplinary Journal Honoring the Voices, Perspectives and Knowledges of First Peoples through Research, Critical Analyses, Stories, Standpoints and Media Reviews

Volume 7, Number 1, 2012, pp. 118-126

Can Spiritual Ecograms be Utilized in Mental Health Services to Promote Culturally Appropriate Family and Couples Therapy with Indigenous People?

Nicole Elliott[a]

[a] M.A. Candidate in the Counselling Psychology Program, University of Toronto, Toronto, Canada

Abstract

Research addressing the potential utilization of spiritual ecograms with Indigenous families and children, specified by experienced professional in the field of Native-American psychology, was critiqued and reviewed in order to attend to its influence and applicability regarding the literature of Indigenous family therapy, and how it could be beneficial in therapy with Indigenous families. The literature review presents an effective tool, providing an in-depth exploration of spiritual strengths of the family and or children that incorporates spirituality into techniques commonly used in family therapy practice. Study results (Limb & Hodge, 2011) show that this tool is consistent with Native-American culture (Brucker & Perry, 1998; Green, 2010; Paniagua, 2005; Trujillo, 2000) and highlights many beneficial qualities for its utilization in practice. Limitations and recommendations for future research are also discussed.

Overview

Spirituality is an important component in family therapy, and is considered an essential element for delivering treatment that is culturally competent with Indigenous[1] clients (Wendt & Gone, 2011). In order for therapy to reach cultural competence, the therapist must learn and demonstrate the congruent behaviors, attitudes and policies that will enable the therapist to work effectively in cross-cultural situations. Cultural competence can be viewed as a process beginning with sensitivity, awareness, and knowledge and then acquiring the appropriate skills necessary for adapting to cross-cultural issues and including them into therapy. This review of the literature examines the potential use of a spiritual assessment tool, the spiritual ecogram, as modified by Limb & Hodge (2011) for use in psychotherapy with Native American[2] families.

Corresponding author:
Nicole Elliott, Ontario Institute for Studies in Education, University of Toronto, 252 Bloor St. West, Toronto, ON, Canada M5S 1V6
nic.elliott@mail.utoronto.ca

Although spirituality is viewed as being an essential element in providing culturally competent

1 Indigenous is used in this review to identify the cultural group of the People who are Native to colonized land (Canada, United States of America, Australia). This term is used broadly in a global sense.

2 Native American defines the Native people to the United States of America and is used separately to "Indigenous" when specifying the results from the study conducted by Hodge and Limb (2011), which examined the cultural consistency based on the expert knowledge and ratings from professionals with a specific background in Native American culture.

family therapy, it is often neglected in the training of therapists (DiLorenzo, Johnson, & Bussey, 2001; Frame, 2000; Grams, Carlson & McGeorge, 2007). This can become problematic when providing mental health and healing services to Native American families because many Indigenous people view spirituality as being a fundamental role in their lives and some believe that their challenges arise from imbalances in their spiritual relationships. Therefore, when working with these families, spiritual assessments are necessary to help the family achieve an appropriate family balance and mental health. Including spirituality into therapy for this population is critical for communication and change (Cross, 2002; Limb & Hodge, 2008; Rothery & Enns, 2001).

Many tools have been created to help therapists incorporate spirituality into the intervention strategies of Native American families (Hodge & Limb, 2010). The most cited of these tools in the literature are: spiritual life maps (Hodge, 2005a), illustrated descriptions and maps of an individual's spiritual life; spiritual genograms (Hodge, 2001), illustrate the flow of spirituality across at least three generations; spiritual ecomaps (Hodge & Williams, 2002), focus on clients' current spiritual relationships as they are happening in the present; and the spiritual ecograms (Hodge, 2005b). The spiritual ecogram is one of these spiritual strength assessment tools, not yet utilized, that can integrate spirituality into therapy and allows the family's participation in planning for their future in a natural interactive way. Spiritual ecograms are unique to family therapy because they combine the strengths of genograms[3] and ecomaps[4] into one single diagram, depicting the family connections between past and present functioning.

The main problem identified in the study composed by Limb & Hodge (2011), is that spirituality is valued highly in Native American culture, and therefore, lack of training has created barriers in communication and treatment. For instance, some therapists may not be aware of the importance of spirituality in Indigenous people's lives, or the traditions and practices that are involved. Furthermore, therapists may not have an understanding of the traumatic history that Indigenous people have endured through colonization, where for some of the Indigenous generations, it was illegal to practice traditional ways. The following study in review was conducted to examine how congruent spiritual ecograms are with Native American culture.

Method

Fifty Native American therapists, practitioners, social workers, counselors, and psychologists with extensive practice and knowledge regarding Native American culture were identified and asked to participate in the study by completing an online survey. A majority of these professionals (84%) identified themselves as being Native American[5].

The survey instrument developed for the study used a modified version of the spiritual ecogram[6] assessment tool by the authors Gordon Limb and David Hodge (2011), in order to incorporate Native American culture into the context, and to make the instrument more consistent for use with Native American families and children. Spiritual ecograms provide a graphic snapshot of

3 A geneogram is similar to a family tree but includes additional relationships amongst the individuals.

4 An ecomap is a graphical representation that shows all of the systems at play in an individual's life.

5 The professionals self-identified their Native American heritage, and the participants identified tribal nations of Lakota, Navajo/Dine, Cherokee, Chippewa/Gibwa, Mixed blood/ American Indian, or other tribal affiliation.

6 For an example of the spiritual ecogram see Limb & Hodge (2011) page 3.

the overall spiritual composition of the family system while also depicting features of stability/ fluidity and commitment to certain beliefs and traditions (Hardy & Laszoloffy, 1995). Thus, the spiritual ecogram was modified to include Indigenous traditions and beliefs such as ceremonies, creator, community, and spiritual beings. The final survey was composed of two primary components. The first featured a general overview of spiritual ecograms, and provided an example. The Native American experts evaluated the cultural consistency of the assessment tool and rated the validation of use in therapy with Native American families. Following, the participants were presented with a set of questions to help operationalize the genogram aspects (featuring questions of historical elements), and ecomap aspects (questions featuring present relationships with rituals, creator, spiritual being, and transpersonal being). Consistency was measured via an 11-point scale (0 being not consistent at all with Native American culture, and 10 being completely consistent with Native American culture). The experts were then asked to list the strengths and weaknesses of each question set.

The survey was first pilot tested among five individuals who were attending an American Indian academic meeting and were asked to review the instrument. The survey was then refined based on feedback, and was delivered to participants by email via a URL link. Due to time constraints to complete the survey instrument, participants were rewarded $50.00 following completion of the survey. Both parametric[7] and non-parametric[8] tests were conducted when applicable. The background characteristics of the participants were analyzed using tests of association between the variables and the demographic items. For analysis of the qualitative items, such as the open-ended questions used to identify the strengths and weaknesses of spiritual ecograms, a constant comparative methodology[9] was used to examine data for similarities, patterns, and common themes (Glasser & Strauss, 1967).

Results

There was a considerable variance among the 50 professionals in the ratings of the overall consistency of the spiritual ecograms with Native American culture. Although the perceptions of the overview were consistent across most demographic variables (no significant differences emerged), those participants who identified themselves as being 50 years of age or older, tended to rate the conceptual overview of the spiritual ecogram as less consistent with Native American culture (Limb & Hodge, 2011). This demographic difference was also illustrated when participants rated the question sets. Overall, the participants evaluated the spiritual ecogram as having a moderate level of consistency with Native American culture. The most recognized strength of the spiritual ecogram was that it allowed for a holistic approach[10] to therapy with the Native American family or client. The most common theme identified was that ecograms allow the family to see the big picture, and acknowledge how everything is interconnected. A common

7 Parametric tests make assumptions about the nature of a specific population from which the observations were drawn from. These tests suggest the importance of the population in the context of the observation and provide interpretation. The t and F tests, and the Pearson correlation coefficient are the most familiar of these tests (Siegal, 1957).

8 Non-parametric tests do not make assumptions about a population. Most non-parametric tests are used with nominal data such as the chi-square test, Fisher exact probability test and the Spearman rank correlation (Siegal, 1957).

9 Constant comparison analysis involves taking one piece of data (one interview, statement or theme) and comparing it to all others in a data set in order to generate knowledge about common patterns and themes within human experience (Thorne, 2000).

10 A holistic approach identifies that the whole of a complex system, is functionally greater than the sum of its parts and according to the Native world-view, a holistic approach recognizes that an individual is healthy when the physical, spiritual, social/emotional, and intellectual/ mental components of the self are in balance.

limitation of the ecogram was that it came across as complicated and visually overwhelming. It was also identified that the utilization of the ecogram in family therapy can become problematic when being used with Indigenous people who follow a collectivist view[11]. They might have difficulty identifying themselves in the center of the system.

Next, the cultural consistency of the spiritual genogram and ecomap question sets were evaluated. The spiritual genogram question set involved sample questions pertaining to historical elements. The experts rated these components as being moderately consistent with Native American culture.

The spiritual ecomap question set included sample questions in four areas: rituals, God or creator, spiritual community, and transpersonal being. All were rated consistent with Native American culture. The ritual questions were rated the highest, followed by the transpersonal being, spiritual community, and God/creator questions. Common themes that were identified as limitations to both question sets were that some of the terms were not appropriate to use when working with more traditional families. Some tribes have spiritual practices and symbols that are considered sacred and not to be shared with outsiders. For example, in typical genogram sections, families are asked to reflect and speak of those who have passed on. One of the experts suggested that, "some tribal cultures teach it is taboo to speak of or mention the dead. For those cultures, the genogram section may be inappropriate."

Contextualizing the Reviewer's Position

As a non-Aboriginal person learning and immersing myself in the area of Aboriginal psychology, it is imperative that I acknowledge that this is my own view and that I write from my own position as a student and aspiring mental health professional. What I write does not represent the voice of indigenous people, and speaks for only my own thoughts and interpretations of the discussed literature. Before addressing the mentioned research, it is important of the context in which I will be critiquing the said literature.

I am of Scottish and Irish Ancestry, and was raised on a farm, which my father inherited from his father, on the outskirts of a small hamlet called Shetland in South-Western Ontario. Growing up on a farm shaped my strong work ethic, patience, and respect, which I exude in my academic career. I have become acquainted with Aboriginal psychology through my graduate work at the University of Toronto, and posses a deep respect and interest in providing appropriate care and literature that can further benefit the community. Through my involvement in Aboriginal research, I have become engrained in the Aboriginal community of Toronto, through various projects and events. My interest in Aboriginal issues sparked through research involvement with the Canadian Federal Correction system, and from there, my research interests have expanded to cultural identity, spirituality, employment issues, and culturally appropriate programs and resources. This literature review is important to me, as I am currently an aspiring therapist and researcher in the Aboriginal community.

11 Collectivist culture is one where people tend to view themselves as members of a larger group, tribe or nation, and usually consider the needs of the group to be more important than the needs of the individual.

Critique

This study acknowledges the importance of incorporating spirituality into therapy with Native American families and provides therapists with an appropriate assessment tool as they seek to enhance cultural competence in their therapy with Native American families and children. This research is a strong contribution to the literature because it highlights the deficits in family therapy techniques when working with Indigenous families and children, and provides an effective solution for repairing these gaps. Although the study demonstrated that the spiritual ecogram can be utilized as a powerful resource in the field of marital and family counseling, there were a few limitations to the methodology that must be recognized.

First, participants were selected and identified as experts in the area of Native American culture by one of the authors of the study. Since the author used non-probability sampling in the method of convenience sampling[12], there is likely to be bias in the results. Furthermore, in addition to convenience sampling, purposive/snowball sampling[13] was used, where the identified experts were asked to contact any other experts in Native American culture. This becomes biased because there are potentially many other experts from different tribal or spiritual perspectives that could have been included in the study. Furthermore, members of the Native American community themselves, who would be receiving such services should have been included in determining the cultural competency of such a sensitive tool. Consultation from Elders and healers would have strengthened the findings of the research.

Also, there was no pre-test administered to the participants to confirm their expertise status as a professional or academic in the area of Native American culture. To critique an instrument in mental health services, the experts should have had knowledge and experience in individual and family therapy techniques. Since the elements that classified the participant as being an "expert" on the topic are unknown, it is difficult to apply these results for the benefits of other helping professionals, and thus presents a threat to external validity. Although this instrument is intended for use on a very specific population, the use of non-probability sampling methods creates a barrier for using this assessment as a guide service for other similar population such as Canadian Aboriginals[14], and this speaks to greater issues of generalizability with a population that has great within-group differences. Furthermore, the authors (Limb & Hodge, 2011) did not specify the criteria in which experts defined themselves as being Native American, which also poses a threat to validity.

Finally, definitions for important concepts in the study, such as spirituality or religion were not identified. This could potentially threaten the results of the study since these words could have a variety of meanings specific to each participant. It is also important to recognize that professionals with extensive knowledge of Native American culture could only utilize the instrument presented in the research, especially since the majority of the participants were Native American themselves. The purpose of the research as defined in the research problem was to develop an instrument for therapists to use with Native American families in order to reach cultural competence in therapy. The assessment would be rather difficult for therapists who have not been trained to work with Indigenous populations.

12 Convenience sampling involves participants who are both easily accessible and willing to participate in a study (Teddlie & Yu, 2007).

13 Purposive sampling selects individuals based on a specific purpose associated with the research question (Teddlie & Yu, 2007).

14 Canadian Aboriginal people are those who are Native to Canadian land, including groups of the First Nations, Métis, and Inuit.

Apart from its limitations, the study also had many positive outcomes. The results demonstrated that spiritual ecograms were consistent with Native American culture and could potentially be utilized in family therapy techniques. Although the limitations point out that a large amount of bias may exist, the themes that occurred from the participant's feedback could be embraced in the refining of this assessment tool.

The results of this study do provide evidence that the modified version of the spiritual ecogram has potential for use in family therapy with Native American families. With that said, I support the findings of this study however, I believe that exploration of this spiritual assessment has only just begun. Before clinical use, Elders of Native American groups should review this assessment. Furthermore, this tool has been adapted to promote culturally competent therapy, however it has been recognized that a great amount of knowledge of Indigenous culture should be known before its use. Therapists, who utilize this tool, must also be aware that it may not be appropriate for all Indigenous families. One must explore the family dynamic, connection to Indigenous culture and spirituality before administering such a tool. As a therapist in training, I think it is essential to learn about multicultural issues, especially for work with Indigenous clients. Lastly, the results of this study are supportive to the field of Indigenous psychotherapy as it supports the ideology that many psychotherapeutic tools must be revised to meet the specific needs of Indigenous people.

Indications for further research

This research is a starting point for providing an effective tool for family therapists to increase cultural competence in their work with Native American families. Although it was merely a step, it provided a framework for potential research on this topic. Future research would need to address the issues presented in this study such as the common weaknesses of spiritual ecograms identified by the participants. One large issue in the study was the language used in the question sets. Future research should develop question sets that are client driven, and can be tailored to reflect the specific needs and interests of the Native family and their tribal customs and beliefs, such as adjusting the framework for taboos and sacred symbols. These aspects need to be incorporated into the use of spiritual ecograms so that the family themselves can be valued as the expert of their own family and spirituality.

The utilization of spiritual ecograms in therapy with Native American families can further be explored by conducting research that examines how effective this tool actually is in therapy with families. The study informed us that spiritual ecograms are considered to be culturally consistent with Native American culture; however, it has not yet been studied if spiritual ecograms statistically show an improvement in therapy when used with Native American families, and how this approach differs when compared to a non-spiritual based approach. This is a potential area of exploration for future research, although careful consideration will have to be taken in response to various ethical concerns related to cross-cultural healing and definitions of healing and wellness and associated measurement tools.

Evaluation of potential contribution to the field of Couples and

Family Psychotherapy

The results illustrated that spiritual ecograms were moderately consistent with Native American culture and, if used properly, they can help family therapists develop culturally appropriate interventions with Native American families.

Within the core competency domains of marital and family therapy, spirituality is acknowledged as one of the areas that the therapist can recognize the background and the systematic dynamics of the family (Stone Carlson, McGeorge & Anderson, 2011; Hodge, 2000). However, the domain of spirituality is not often utilized within treatment. This study provides valid information that illustrates the effectiveness of incorporating spirituality into family therapy, especially with Native American family systems, since spirituality is such a foundational role that has an impact on all areas of life for Indigenous peoples.

This research is unique to the field of couples and family psychotherapy because it combines core elements from both genograms and ecomaps to develop a tool that can allow the client to see the big picture of how outside factors can affect relationships within the family system. In the case of the Indigenous population it is important to be able to look at the types of relationships that each family member has with spiritual factors such as the creator, ceremonies, community, and spiritual beings, and how these relationships work with one another (Sutton & Broken Nose, 1996; Tafoya, 1989).

Another contribution that this research offers to the field of family therapy, is that it recognizes the need to develop an assessment instrument that therapists can use with Indigenous families that has been adapted to incorporate their belief systems and cultural needs. Although the efficacy on utilizing the spiritual ecogram in active therapy with Native American families has not yet been studied, it is crucial (Hodge, 2005b) to understand the elements that will make it most effective as an assessment tool itself before testing its use with a family. This is important given the sensitive nature of many Indigenous ceremonies and beliefs, and the historical trauma that many Indigenous people have endured from colonization and Eurocentric psychotherapeutic practices that are inconsistent with the Indigenous worldview. If questions are not phrased appropriately, considerable harm can occur (Duran, 2006).

This study helps family therapists to incorporate spirituality into their assessment and intervention plans and provides an excellent guide for the appropriate dialogue that can be used when doing so such as, "How would you describe the spiritual journey of your family", and "how was your family's spiritual legacy affected over the generations? Are you aware of the historical events that may have impacted your cultural and spiritual beliefs? (Limb & Hodge, 2011)," to illustrate a few examples. This research also brings light to certain factors that need to be carefully considered when implementing therapy to a Native American family such as sacred customs and symbols that may not be shared with the therapist, and the importance of understanding and respecting the culture prior to therapy. Furthermore, in order for spiritual assessment tools such as the spiritual ecogram to be used effectively and appropriately, therapists must have the knowledge and competence of Indigenous history and ethics prior to their use.

Finally, this study is important to the contribution on family therapy research because it advances the knowledge in a therapeutic setting by examining the cultural consistency, strengths and limitations of using spiritual ecograms to conduct spiritual assessment with Native American families. The results of this study concluded that the concepts of spiritual ecograms and the question sets involved are moderately consistent with Native American culture. The feedback

given, as a component of this study, can provide valuable information for the improvement of an ecogram assessment tool.

Overall, the grand themes discussed and the ideas presented within this study were shown to be very useful for developing culturally appropriate techniques that can be used in therapy with Indigenous families. As mentioned earlier, cultural competence is viewed as a process beginning with sensitivity, awareness, and knowledge and then acquiring the appropriate skills necessary for adapting to cross-cultural issues and including them into therapy. Accordingly, if therapists are properly trained in Indigenous culture, and are aware and sensitive to their unique needs, than the spiritual ecogram can be utilized as an effective tool for practicing culturally appropriate couples and family therapy.

References

Brucker, P.S., & Perry, B.J. (1998). American Indians: Presenting concerns and considerations for family therapists. *American Journal of Family Therapy*, 26, 307-319.

Cross, T. (2002). Spirituality and mental health: A Native American perspective. *Focal Point*, 16(1), 22-24.

DiLorenzo, P., Johnson, R., & Bussey, M. (2001). The role of spirituality in the recovery process. *Child Welfare*, 80(2), 257-273.

Duran, E. (2006). *Healing the soul wound: Counseling with American Indians and other Native peoples*. New York, NY: Teachers College Press.

Frame, M.W.(2000). The spiritual genogram in family therapy. *Journal of Marital and Family Therapy*, 26, 211-216.

Glasser, B., & Strauss, A. (1967). *The discovery of grounded theory*. Chicago, IL: Adeline

Grams, W.A., Carlson, T.S., & McGeorge, C.R. (2007). Integrating Spirituality into family therapy training: An exploration of faculty member beliefs. *Contemporary family therapy*, 29(3), 147-161.

Green, B.L. (2010). Culture is treatment: Considering pedagogy in the care of Aboriginal people. *Journal of Psychosocial nursing and Mental Health Services*, 48 (7), 27-34.

Hardy, K.V., & Laszoloffy, T.A. (1995). The cultural genogram: Key to training culturally competent family therapists. *Journal of Marital and Family Therapy*, 21, 227-237.

Hodge, D.R. (2000). Spiritual ecomaps: A new diagrammatic tool for assessing marital and family spirituality. *Journal of Marital and Family Therapy*, 26(2), 217-228.

Hodge, D.R. (2001). Spiritual genograms: A generational approach to assessing spirituality. *Families in Society*, 82, 35-48.

Hodge, D.R. (2005a). Spiritual life maps: A client-centered pictorial instrument for spiritual assessment, planning and intervention. *Social Work*, 50, 77-87.

Hodge, D.R. (2005b). Spiritual ecograms: A new assessment instrument for identifying clients' spiritual strengths in space across time. *Families in Society*, 86, 287-296.

Hodge, D.R. & Limb, G.E. (2010). A Native American perspective on spiritual assessment: The strengths and limitations of a complementary set of assessment tools. *Health and Social Work*, 35(2), 121-131.

Hodge, D.R. & Williams, T.R. (2002). Assessing African American spirituality with spiritual eco-maps. *Families in society*, 83, 585-595.

Limb, G. & Hodge, D.R. (2011). Utilizing spiritual ecograms with Native American families and children to promote cultural competence in family therapy. *Journal of Marital and Family Therapy*, 37 (1), 81-94.

Paniagua, F.A. (2005). Guidelines for the assessment and treatment of American Indian clients. In F.A. Paniagua (Eds.), *Assessing and treating culturally diverse clients* (3rd ed., pp. 93-113). Thousand Oaks, CA: Sage.

Siegal, S. (1957). Nonparametric statistics. The American Statistician, 11(3), 13-19.

Stone Carlson, T., McGeorge, C.R., & Anderson, A. (2011). The importance of spirituality in couple and family therapy: A comparative study of therapists' and educators' beliefs. *Contemporary family therapy*, 33, 3-16.

Sutton, C., & Broken Nose, M.A. (1996). American Indian families: An overview. In M. McGoldrick, J. Giordano, J.K. Pearce (Eds.), *Ethnicity and family therapy* (2nd ed.). New York, NY: Guildford Press.

Tafoya, T. (1989). Circles and Cedar: Native Americans and family therapy. In G.W. Saba, B.M. Karrer, K.V. Hardy (Eds.), *Minorities and family therapy*. Binghamton, NY: Haworth Press.

Teddlie, C., & Yu, F. (2007). Mixed methods sampling: A typology with examples. *Journal of Mixed Methods Research*, 1(1), 72-100.

Thorne, S. (2000). Data analysis in qualitative research. *Evidence-based Nursing*, 3(3), 68-70.

Trujillo, A. (2000). Psychotherapy with Native Americans: A view into the role of religion and spirituality. In P.S. Richards & A.E. Berin (Eds.), *Handbook of psychotherapy and religious diversity* (pp. 445-466). Washington, DC: American Psychological Association.

Wendt, D.C. & Gone, J.P. (2011). Rethinking cultural competence: Insights from Indigenous community treatment settings. *Transcultural Psychiatry*, 49 (2), 206-222.

First Peoples Child & Family Review

An Interdisciplinary Journal Honoring the Voices, Perspectives and Knowledges of First Peoples through Research, Critical Analyses, Stories, Standpoints and Media Reviews

Volume 7, Number 1, 2012, pp. 127-140

Early Learning for Aboriginal Children: Past, Present and Future and an Exploration of the Aboriginal Head Start Urban and Northern Communities Program in Ontario

Angela Mashford-Pringle

PhD Candidate (ABD), Dalla Lana School of Public Health, University of Toronto, Toronto, ON, Canada

Abstract

This article provides some key findings from a case study of the Aboriginal Head Start Urban and Northern Communities (AHSUNC) Program in Ontario. Some of the key findings were improved self-reported health status, commitment to cultural and linguistic revitalization, reduced tobacco use, improved knowledge of healthy living practices among Aboriginal children and their families. The number of off-reserve Aboriginal children that can experience AHSUNC is limited by funding and availability of space and human resources. The participants in this study have shown improved knowledge, interaction with their children, and increased understanding of their biculturedness within Ontario. Therefore it is important to increase this funding and continue to conduct research with AHSUNC projects across Ontario to document and highlight their successes as a model for other provinces/territories and early childhood programs.

Keywords: Aboriginal, First Nations, early childhood development, early childhood, Canada, Ontario, programs

Introduction

This article focuses on the Aboriginal Head Start Urban and Northern Communities Initiative (AHSUNC), which served Indigenous peoples from all three Aboriginal groups[1], with the majority of the participants in this study identifying as either First Nations or Métis. There are significant issues that Aboriginal people face including lower educational attainment, levels of employment, health status, increased poverty, loss of culture and language. More than one-third of Aboriginal people in Canada do not have a high school diploma and just over half of off-reserve First Nations people report their health as being excellent or very good. These factors are the result of colonialism, poor policy and legislation, and ignoring Aboriginal voices concerning their experiences, needs and desires. In order to reduce these negative factors, Aboriginal parents and Elders met with the federal government in 1993 to create a program that would give at-risk Aboriginal children a positive and culturally relevant head start before they begin elementary school.

Corresponding author:
Angela Mashford-Pringle
angela.mashford.pringle@utoronto.ca

1 In the current literature, the terms 'Indigenous' and 'Aboriginal' are often used interchangeably to describe all Indigenous groups in Canada, who were the original inhabitants in this country (Borrows, 1994; Posluns, 2007; Smith, 1999). Aboriginal people in Canada are comprised of three main groups: First Nations, Métis and Inuit peoples. The term 'Aboriginal' is used as it is the terminology used in the Constitution Act of 1982, the Charter of Rights and Freedoms, and by many federal government departments (Borrows, 1994; Posluns, 2007).

The Road to Developing the Aboriginal Head Start Urban and Northern Communities Program

By 1763, the relationship between Aboriginal people and Europeans changed. After the Royal Proclamation expressly acknowledged Aboriginal people as allies and sovereign nations, the creation of Canada through British North America Act of 1867 made Aboriginal people wards of the state. Further colonialism and oppression occurred with the introduction of the Indian Act in 1876 (Miller, 1991). This oppressive legislation reflected and sought to implement the assimilation policy of the time.

Residential schools were opened in the 1880s and ran until 1996 (Stonechild, 2006). Generations of First Nations children were subjected to the rudimentary learning institutions where they experienced physical, sexual, emotional and verbal abuse (Aboriginal Healing Foundation, 2008; Stonechild, 2006). These schools were designed to eradicate First Nations languages and cultures by indoctrinating First Nations children in western worldview and teaching European languages (Battiste, 1986; Stonechild, 2006). Many First Nations parents and Elders recommended that Aboriginal children attend these schools to acquire a western education (Wotherspoon, 2004). Western education was prophesized to help Aboriginal people learn about the dominant culture and their economy, which would lead to new ways to provide food, clothing, shelter and governance for Aboriginal people (Stonechild, 2006). Many Elders and Aboriginal leaders have argued that education would be the new buffalo for Aboriginal people (Stonechild, 2006). However, many Indigenous scholars (Alfred, 2009; Ball, 2004; Battiste, 2000; Turner, 2006) argue that there is a need for culturally appropriate education that will assist Aboriginal people with working toward self-determination and self-governance by creating Turner's 'word warriors'. It is extremely important to educate young Aboriginal people in the western education system so that they can learn how it works, provide insight into the system, and begin to advocate for Aboriginal people within it.

The Canadian government has taken very small steps to improving the lives of Aboriginal people in Canada after centuries of colonization, assimilation tactics, and neglect. By the 1990's, the federal government had announced Aboriginal Early Childhood Development programs, intended to improve the lives of urban Aboriginal children (Greenwood, 2001; Palmantier, 2005). In 1994, Health Minister Dianne Marleau announced the Aboriginal Head Start Initiative (Palmantier, 2005). The Aboriginal Head Start Urban and Northern Communities Initiative provides community-based and community driven programming with a specific focus on culture and language, health, education, nutrition, social support, and parental involvement for Aboriginal children between the ages of 3 and 5 years old.

Many scholars (Barton, Thommasen, Tallio, Zhang, & Michalos, 2005; Benoit, Carroll, & Chaudhry, 2003; Cox, 2002; Greenwood, 2001; Newbold, 1998; Palmantier, 2005) have studied Aboriginal early childhood development and found there is a great need for such services, but there needs to be great improvements. Aboriginal Head Start is a building block for early childhood learning and development. Moving forward, federal government policies and programs could build on this well-received program and continue by working with Aboriginal peoples to ensure culturally relevant education for Aboriginal children and youth beyond pre-school years. Culturally relevant programming can also help to improve health and health status by using a holistic and upstream approach that incorporates the social determinants of health (Health Canada, 1998).

The social determinants of health were developed based on the Lalonde Report (1974), which suggested that health was more than the absence of disease and other factors influence an individual's health. Health Canada (1998) adopted the population health approach, which had twelve key social determinants of health, which are in Table 1, and can significantly impact an individual's life. Therefore, if there is an increase in educational attainment, it is likely that employability will be increased, which would then change the physical and social conditions a person experiences that can be affected by a number of different factors, not just education. If these change, then health status, or at least self-reported health, will likely improve (Tjepkema, 2002). Twenty-nine families participated in this research from the Waabinong Head Start in Sault Ste. Marie, Ontario. The results show a positive trend toward improved health, education and social support. Twenty-six percent of parents and caregivers responded that their general and mental health increased over the three months after being a part of the AHSUNC community, but there was a decrease in the parents/caregivers ratings of the child's health (23% declined). Ten percent of parents and caregivers returned to school, and 33% of parents and caregivers changed their employment status in the period between the two surveys.

Table 1 Health Canada's Social Determinants of Health

Key Social Determinants of Health	
Income and Social Status	Social Support Networks
Education and Literacy	Employment/Working Conditions
Social Environments	Physical Environments
Personal Health Practices & Coping Skills	Healthy Child Development
Biology and Genetic Endowment	Health Services
Gender	Culture

Many changes have occurred in Aboriginal education in Canada over the past two hundred years. Communities have been dispersed, moved, relocated, and subject to policies and legislation which sought to assimilate Aboriginal peoples into mainstream society. From residential schools, which forced Aboriginal children to attend and learn a foreign language and culture, to provincial curriculum being mandated for on reserve schools, Aboriginal people have persevered to ensure that their traditional ways of teaching, learning, and knowledge transfer continue to occur, while policies and legislation have tried to prevent this.

In 1969, the Department of Indian Affairs released the 'White Paper'. The 'White Paper' or the Statement of the Government of Canada on Indian Policy, was introduced by Jean Chretien in June 1969. The paper outlined reforms that would abolish the Indian Act, which would enfranchise status First Nations people, abolish the reserves, and make First Nations people equal to all other Canadians (Weaver, 1981). The Red Paper,by Harold Cardinal and the National Indian

Brotherhood stated that the government's policy was unacceptable and would be detrimental to the existing rights and treaties that First Nations had signed. In 1972, the National Indian Brotherhood wrote the "Indian Control of Indian Education" paper also known as the 'Red Paper' (Barman, Hebert, & McCaskill, 1986). While the federal government wanted to take full control of Indian education the National Indian Brotherhood, now the Assembly of First Nations, argued that parental responsibility and local control of education was necessary (National Indian Brotherhood, 1972). The Trudeau government agreed in principle to the 'Red Paper' and agreed to transfer control to Aboriginal people (Barman et al., 1986). The Department of Indian Affairs did not believe they could implement such a policy and the federal government has continued to find legal ways around allowing Aboriginal communities (both on and off reserve) to take control of education (Barman et al., 1986; Longboat, 1986).

By the early 1980s, regardless of poor funding from the federal government, more than 75 percent of Indian bands had taken control of their education either partially or fully. By taking control, Aboriginal people could develop and implement an Aboriginal specific curriculum, as well as determine where funds would be spent (Barman et al., 1986). Re are a number of barriers to on reserve education including funding, human resources, and facilities. By 1985 when the Indian Act was revised to restore status to thousands of First Nations people who previously lost it through marriage or other assimilatory provisions of the Indian Act, there were discussions by the federal government to create early learning and child care initiatives (Greenwood, 2001; Palmantier, 2005).

By the early 1990s, there was a great deal of activity surrounding early childhood development and child care. Politically, Aboriginal people had come to be a focus of various federal government programs, services, and reports. The provincial government in Ontario was still taking a stand-off approach to Aboriginal people, even though greater numbers of Aboriginal people were migrating to urban centres like Toronto.

The Canadian government hosted the 1990 World Summit for Children and by 1991, the Royal Commission on Aboriginal Peoples had begun its investigation into the social issues surrounding Aboriginal people in Canada (Cox, 2002). By 1994, a discussion paper on Aboriginal childcare was released to the public and by the end of the year Minister Axworthy's Social Security Discussion Paper reaffirmed the federal government's commitment to First Nations and Inuit communities (Bennett, Blackstock, & De La Ronde, 2005; Cox, 2002). As part of the federal government's commitment, they announced the Aboriginal Head Start Urban and Northern Communities Initiative (AHSUNC) and the First Nations and Inuit Child Care Initiative (FNICCI) to provide Aboriginal early childhood development that was directed and controlled by Aboriginal people in a holistic way (Ball & Elliot, 2005; Greenwood, 2001; Health Canada, 2000; Palmantier, 2005).

The Program

AHSUNC is an off-reserve early learning program developed by and for Aboriginal children between 3 and 5 years old and their families. The program is provided in urban and northern communities across Canada on a four day per week cycle between September and June and is free to families as half day session similar to the local kindergarten program (Public Health Agency of Canada, 2002). There is no standard curriculum across the country, but each project uses a school readiness curriculum, such as high scope, infused with Aboriginal content, which includes culture and language components from the local Aboriginal communities. The high scope curriculum has been built around developmental milestones and provides teaching

practices that assist young children with learning language, literacy and communication; social and emotional development; physical development, health, and well-being; and arts and sciences (HighScope Curriculum, 2012). ASHUNC is one piece of the broader education and health promotion puzzle; it needs to provide young Aboriginal children with a sense of identity, heritage and bi-culturedness that will reduce the gaps in health and education that so many Aboriginal people experience in Canada.

For many Indigenous Peoples, they must navigate two cultures; Euro-centric and Indigenous. Navigating between the two cultures has been labelled "bi-cultured" by Brown and Smirles (2003). Indigenous Peoples, regardless of where they live, now live in a modern world where the dominant society or world order has been mostly derived from historical imperial political structures that brought colonization violence and capitalism upon Indigenous cultures. An ethnocentric and Eurocentric culture in the Americas, particularly in North America, has dominated Indigenous Peoples social orders. Indigenous Peoples today are restoring their practices within their cultures but are still working and living within the Eurocentric culture. This may lead to internal conflict in terms of spirituality, social relations, and economic patterns that may lead to negative behaviours that contribute to mental health and health problems.

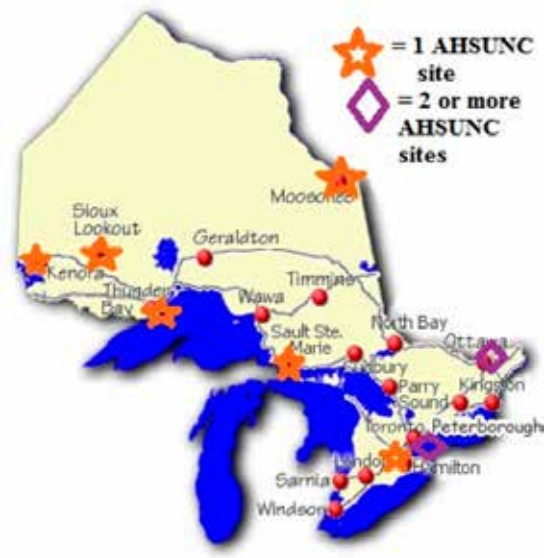
Children who learn their own culture and that of the majority culture become bi-cultured as they grow to understand the traditions, celebrations, religion(s), rights, and beliefs for both the mainstream and their family culture. Brown and Smirles (2003) argue that urban Aboriginal children and youth learn about their "bi-culturedness" from their parents and extended family as they provide the children with knowledge about how to negotiate the oppressive society outside their front door. Other scholars (Friedel, 1999; Ball, 2004) further argue that dedicated culturally-specific programs are effective if families become involved in the education used by Euro-Canadians, otherwise the program goals and achievements will be lost or have little or no effect as the children do not see themselves reflected in the curriculum. It is necessary for Aboriginal in Canada to be cognizant of the political and legal issues that separate their self-perceived identity from the "acknowledged" identity (legally defined by the federal government), but to decolonize and connect with traditional teachings like the Seven Grandfather teachings that many Ontario First Nations believe in, it is necessary to have an identity that blends their Aboriginal and non-Aboriginal identities together in a bi-cultured way (Mishibinijima, 2004).

The first six AHSUNC projects in Ontario recruited children who were living in low-income or single parent families and those who were at risk for abuse, neglect or in child protection. There are six core components to AHSUNC: education and school readiness, health promotion, nutrition, parental/family involvement, social support, and culture and language. Elders, Aboriginal community members, and parents were brought together to review the American Head Start program and used components of that program for the inception of the Canadian Aboriginal head Start program. The core components work holistically to improve Aboriginal children's lives from different perspectives, with the values and beliefs of the program providing guidance as to how to implement the core components. Some of the values and beliefs are: that children "have a right" to be proud of being Aboriginal, learn an Aboriginal language and worldview, receive guidance in a culturally appropriate manner, have the right to acquire knowledge in an experiential manner, and be loved by their family and community while living a healthy lifestyle.

All AHSUNC projects in Ontario are licensed as daycare facilities under the Ontario Day Nurseries Act (DNA), which stipulates that all teaching staff must have an Early Childhood Educator (ECE) diploma and pass a criminal reference check before working with children. There

are currently 14 AHSUNC projects in Ontario funded by the Public Health Agency of Canada's Ontario Region office. The projects are located in Sioux Lookout, Kenora, Fort Frances, Thunder Bay, Sault Ste Marie, Moosonee, Hamilton, Fort Erie, one Inuit project and one First Nations and Métis project in Ottawa, and four locations representing the four directions of the Medicine Wheel in Toronto shown in Figure 1. In 2005, there were approximately 560 children enrolled in these Ontario projects with regional budget of $ 5,548,000 for all sites. There is some variability in the levels of funding of the Ontario AHSUNC projects, but each project receives money for personnel, transportation, materials including meals, and evaluation. The project funding is reviewed and renewed based on the Treasury Board Secretariat policies and procedures with another renewal cycle occurring after April 1, 2013. Future programming is dependent on the level of funding and sustainability of the funding (Leitch, 2008).

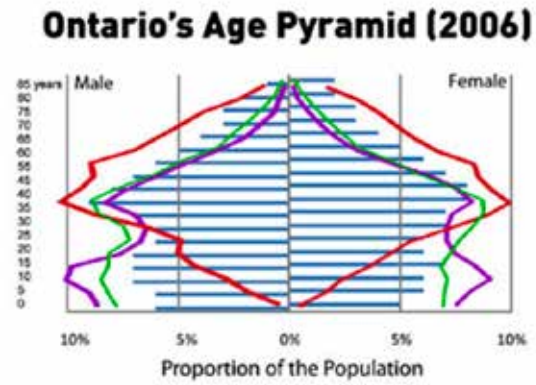
Figure 1: Map of Aboriginal Head Start Urban and Northern Communities Projects in Ontario



The Aboriginal population is the fastest growing population in Canada at 1.7 times faster than the non-Aboriginal rate (Cox, 2002; Hanselmann, 2001; Mendelson, 2006). The statistics also show that more than 62 percent of the Aboriginal identity population resides in off reserve areas like cities and rural towns (Mendelson, 2006). The Aboriginal population is younger than the overall Canadian population. According to Statistics Canada (2006), the there is a total of 147,820 self-identified Aboriginal people in Ontario with 17,400 of those being children between 0 and 4 years of age in off reserve communities (Figure 2). As mentioned early, 560 Aboriginal children between 3 and 5 years old receive AHSUNC programming, which is approximately three percent of the off reserve self-identified Aboriginal children in Ontario. However, Tjepkema (2002) states that an overwhelming number of Aboriginal people suffer from low education, under and unemployment, and health issues, which means that the program is in far greater need than it is funded to provide. AHSUNC was created to give Aboriginal children a "head start" in education, but the program offers health promotion activities and practices that may also improve the health status of these children and their families.

Many scholars have noted that social problems like alcoholism, family violence and chronic unemployment all stem from the lack of control of the education system for Aboriginal people (Frideres & Gadacz, 2001; Mackay & Myles, 1995); therefore it is necessary to establish research that proves that Aboriginal controlled education works the best for Aboriginal people and that many social problems can be addressed if Aboriginal people feel a sense of pride in their identity, even as they are faced with belonging in two different cultural worlds. A sense of pride is clearly a key component of AHSUNC, which leads to improved self-esteem. Self-esteem is intrinsically linked to the way a person is identified, as Dawson (1988) argues that if children are proud to be identified as "Indian", than they will have higher self-esteem than the Aboriginal children who do not want to identify as "Indian" or "Aboriginal". Therefore it is important to

Fig 2: Ontario's Age Pyramid - All ages



Source: Ministry of Citizenship and Immigration (n.d). In presentation "Aging and the Not-for-Profit Sector: Ready or Not? http://www.citizenship.gov.on.ca/english/pp/next10/presentations/aging.shtml.

note that Aboriginal people in Canada have been defined by a paternalistic federal bureaucracy, which has excluded many self-identified Aboriginal people through policies and legislation. The mere idea of defining and labelling are colonizing and paternalistic, which can also contribute to poor health status as it affects self-esteem, and can in turn start the cycle of believing/being hopeless within an industrialized society. Corenblum (1996) and Mishibinijima (2004) argue that being defined as a specific ethnic group can be detrimental if the ethnic group in question does not have preferential status in the society.

Many scholars (Greenwood, 2001; Newbold, 1998; Palmantier, 2005; Stonechild, 2006; Turner, 2006) argue that improving Aboriginal educational attainment will have an impact on employability, health status, social support, and self-governance. AHSUNC is primarily aimed at the children in attendance, but parents and caregivers also benefit from the informal education, social support, volunteer experiences, and health promotion information they receive at workshops, in parent/teacher interviews, cultural events, and through their children. In addition, some parents/caregivers are involved in board governance, which teaches them about policy development and how governance works.

Parents and families are the first teachers that children have. May and Aikman (2003) and Friedel (1999) argue that parents and families play a vital role in advocacy at school and ensuring that the child learns about their cultural identity and language early. Having parents/caregivers who teach and pass on culture and language in the home will increase the likelihood that children will continue to learn about their culture beyond what their caregivers teach and will be more receptive to learning more. AHSUNC projects across Canada provide one avenue for children and their families to learn more about their traditions in hopes that Aboriginal cultures and languages can continue to be revitalized and transmitted to generations to come. It is very important to create policies in Canada that support this revitalization as a "protective" factor occurs when there is policy or legislation around an "endangered" aspect of life.

Methodology

In January 2007, I approached the Ontario Aboriginal Head Start Association (OAHSA) to determine if there was research around health and education that I could conduct with them. Waabinong Head Start in Sault Ste. Marie and Fort Erie Head Start agreed to participate, but due to low responses from Fort Erie, they were excluded from the study. The Program Coordinator for Waabinong worked with the Parent Council to create and review questionnaires and assist with recruitment. The questionnaire produced for September asks participants demographic data as well as health, education, social support, culture and language questions. The second questionnaire for December is similar to the first questionnaire without the demographic data being collected and some additional questions regarding changes in education, employment,

culture and language. These questionnaires were developed to meet the needs of this study and to provide information to the projects about their program and its' effectiveness. The questionnaires had both quantitative and qualitative questions to improve reliability and validity. The Parent Council determined that every parent/caregiver with a child enrolled in the 2007/08 school year would be asked to participate in the survey. Ethics approval was sought and awarded in July 2007 by the University of Toronto Research Ethics Board.

Data analysis was conducted for all quantitative questions in SPSS and qualitative open-ended responses were collated in Word 2007. Analysis was done on the initial questionnaire, then on the second questionnaire, then as a comparison of the two answered questionnaires. Looking at the mean and correlation percentages, I checked for statistical significance with Chi square and through t-tests. By looking at frequency tables, cross-tabulations, and the means, trends were revealed for (a) the September questionnaires, (b) the December questionnaires, and (c) the comparison of the two questionnaires. There were a total of 29 respondents to both questionnaires (September and follow-up in December 2007) from Waabinong Head Start. There were 44 responses from September, but only 29 families remained in December of the possible 44 families. The questionnaires were numbered by a family number to ensure that identities were not revealed.

Findings and Discussion:

Demographics about Waabinong Head Start:

The demographic data for Waabinong Head Start was:

- 90 % of primary caregivers identified as the mother of the child
- 90 % of second caregivers identified as fathers or step-parents
- 23 families were single parents or caregivers
- 6 families had two caregivers or parents
- average level of education was high school completion

Skill Development:

In the first three months of attending the program, it is apparent that Aboriginal children show an improvement in their school readiness and early learning skills as well as improved health routines (i.e. teeth brushing and regular doctor and dental visits). Parents and caregivers provided qualitative responses about their child's new skills and knowledge. Sixty-five percent of children are potty-trained in the first three months of attendance at AHSUNC and more than 90 % of children had shown improvements in language, reading and math skills. Parents and caregivers reported improved health routines with their children as well (i.e. teeth brushing, regular doctor visits, and dental visits).

Health and Well-Being:

Parents and caregivers also show improvements in educational attainment, employment, social supports, self-perceived health and mental health status, and health behaviours (i.e. reduced tobacco consumption, increased dental and doctor visits, improved knowledge of illegal drug

effects, etc.). The health and education of the parents and caregivers was also improved as they showed a 26 % increase in health and mental health reports with 10 % who returned to school. Since one third of all caregivers/parents changed their employment status between September and December, it is likely that some of these people did perceive their health as improved because they had meaningful employment that they did not have when completing the first questionnaire. As AHSUNC parents and caregivers began to have a positive sense of identity in being Aboriginal, it is likely that it improved their self-esteem, which in turn could have led to employment and educational opportunities. These improvements are significant and show that a positive environment and social support can improve health and education as suggested in the Ball and Elliot (2005) study, which showed that increases in social support improved the health and educational readiness of children and their families. While these improvements cannot be fully attributed to AHSUNC, it is likely that AHSUNC played an important role in the changes made to both the children and their families through a holistic approach.

Waabinong families also showed an increase in knowledge regarding health promotion and healthy living, as well as how to access "western" health professionals and traditional healers after being in the program for three months. With an increased knowledge and use of health professionals, it is likely that longitudinally these families will have improved self-reported health status compared to other Aboriginal families who do not attend AHSUNC. In partnership, Aboriginal organizations and the federal government should develop health promotion policies ensure equitable access for all Aboriginal people, whether they live on or off reserve, and build upon the successes of the health promotion programs offered by the Public Health Agency of Canada and First Nations and Inuit Health Branch of Health Canada.

A surprising finding in this study was change in tobacco consumption. Ten percent of primary caregivers quit smoking between September and December and almost 20 % decreased the frequency of smoking and more than 22 % changed where they smoked (outdoors versus in the home or car). With these caregiver changes, it is not surprising that 19 % of children were no longer in the presence of cigarette smoke in the home or car at the end of the study. These changes in smoking behaviour could be attributed to the health promotional materials provided to the children and their families at AHSUNC. This finding is positive, but research has shown that some smokers quit smoking only to begin again and must repeat the behaviour change stages up to seven times before they quit permanently (Physicians for a Smoke-Free Canada, 2008). If 10 % of primary caregivers quit smoking after their children had been in AHSUNC for just three months, it would be beneficial to create linkages between various health promotion issues and social programs like AHSUNC. These linkages and partnerships may increase the knowledge of participants and ultimately be the impetus to positive health behaviour changes over time.

The Federal Tobacco Act provides the basic legislation for tobacco consumption and sales, each province has also enacted legislation regarding tobacco consumption and sales. For urban Aboriginal people, it may be beneficial to work from a traditional knowledge perspective; therefore using the traditional knowledge that tobacco is used to request knowledge from others, used in smudging ceremonies, and is considered a medicine by some Aboriginal cultures. Aboriginal organizations could look at policy development around subjects like commercial tobacco consumption and help Aboriginal organizations, on and off reserve, to transmit traditional knowledge about tobacco use to Aboriginal people. Since the study's completion in 2008, there has been considerable research and policy development in the area of Aboriginal tobacco control including the re-development of a federally funded cessation and education program.

Incorporating Culture, Language and Knowledge:

In qualitative responses, caregivers and parents consistently voiced that they want their children to learn their Aboriginal culture and language. More than 90 % of families wanted to learn and use the culture and language that were taught in their homes. This finding is supported by many scholars (Adelson, 2005; Bramley, Hebert, Jackson, & Chassin, 2004; Bramley, Hebert, Tuzzio, & Chassin, 2005; Cheshire, 2001; Greenwood & Shawana, 2000) who also argue that positive self-identity in being Aboriginal and being able to practice and use Aboriginal culture and language will assist in revitalization and transmission of culture and language into future generations. Lertzman (2002) found that Aboriginal peoples, their land and teachings can lead them toward transformation that further develops their traditional knowledge and worldview and this can assist young people in becoming a 'whole human being'.

To ensure that Aboriginal cultures and languages are revitalized and transmitted to future generations, Bramley et al. (2004) argue that language nests are essential. In New Zealand, the Maori have developed a language learning system that immerses young children in the Maori language in the preschool programs. In Canada, there is no education policy that covers all Aboriginal peoples, therefore it would be essential for provinces and territories and the federal government to work with Aboriginal people (as per the RCAP recommendations) to implement language nests or something similar, which could help with revitalization and transmission of cultures and languages in a positive way. Education policies, much like Aboriginal research guidelines (OCAP), should come from the people that it will be for; therefore it would be prudent to reflect on the current educational situation of Aboriginal peoples and how this can be improved (Stonechild, 2006).

Education and Employment of Parents and Caregivers:

Some of the other interesting findings include: one quarter of families were already visiting a Traditional Healer and/or smudging at home, however 88 % had begun to incorporate culture and language from AHSUNC into their homes; there was a 12 % increase in visits with an Aboriginal Social Support Worker; 10 % of caregivers returned to school with another 12 % intending to return to school in the future; 22 % of stay-at-home primary caregivers returned to the workforce and 11 % of second caregivers moved from part-time to full-time employment; approximately 26% of caregivers rated their health and mental health improved, but 23 % rated their child's general health decreased. As the parents and caregivers understand health issues more, they may reflect on their child's health differently which leads to a decreased perception of health. There was also a 20 % decrease in the frequency of smoking with 22 % changing where they smoked; and finally there was increase in the use of other social programs like the Ontario Early Years Centres. This shows that AHSUNC has had a positive effect on the children and families by helping to increase health, education, employment, and social support networks. Of the 29 families that completed both the September and December questionnaires, there was a trend toward healthier lifestyle choices, improved education of the children, upward mobility in employment, increases in self-reported general and mental health of caregivers, and decreases in habits like smoking and alcohol use.

Waabinong Head Start clearly offers more than just school readiness for 3 to 5 year old First Nations and Métis children in the Sault Ste Marie area. The results of the study show that parents and caregivers also benefit from their children attending AHSUNC. Waabinong Head Start is an established project, which began in 1994, and therefore has many ties in the urban community as

well as in Garden River First Nation. It is clear that funding such social programs for Aboriginal people with Aboriginal people involved in the planning, implementation, and continued functioning is important to the overall success of the program. First Nations and Métis families in Sault Ste Marie, Ontario have created a very supportive community that also assists other First Nations and Métis families in the area with raising their children and learning traditional knowledge, culture and language.

The impacts of AHSUNC go beyond the six core components of the program and are defined, captured, and reported on in this study. In the first three months of attending the program, it is apparent that Aboriginal children show an improvement in their school readiness and early learning skills as well as improved health routines and nutrition. Parents and caregivers also show improvements in educational attainment, employment; social supports, self-reported health and mental health status, and health behaviours (i.e. reduced tobacco consumptions, increased dental and doctor visits, etc.).

Conclusion

Aboriginal education for Aboriginal people by Aboriginal people creates healthier communities; similarly, Aboriginal policy development for Aboriginal people by Aboriginal people is more likely to create sensitive, revitalizing, meaningful and healing policy that is of benefit to Aboriginal people. Aboriginal voices have often been excluded from policy tables, but it is necessary to hear from the source how to decolonize and begin the healing journey that so many Aboriginal families have or are starting to undertake. Future policies and policy research needs to hear Aboriginal voices to help with decolonization, which will ultimately lead to individual and community healing. AHSUNC is one piece of the decolonization puzzle, but many other policies for early childhood learning need to be developed with Aboriginal people at the helm.

Using the Sault Ste. Marie site as a case study, this article has provided an overview of some positive changes experienced by Aboriginal children and families that attend AHSUNC in Ontario. The federal government needs to increase the amount of funding available for this program to allow more Aboriginal peoples to access this programming for their families. The provincial government must continue to assist AHSUNC in working within the Day Nurseries Act to revitalize and reclaim Aboriginal cultures and languages across Ontario. Therefore more research, networking, and funding are required to help Ontario's Aboriginal communities to further improve their health and education status.

References

Aboriginal Healing Foundation. (2008). From Truth to Reconciliation: Transforming the Legacy of Residential Schools. Ottawa, Ontario: Aboriginal Healing Foundation.

Adelson, N. (2005). The embodiment of inequity - Health disparities in Aboriginal Canada. *Canadian Journal of Public Health-Revue Canadienne de Sante Publique*, 96(Journal Article), S45-S61.

Alfred, T. (2009). *Peace, Power, Righteousness: An Indigenous Manifesto*. Don Mills, Ontario: Oxford University Press.

Ball, J. (2004). *Early Childhood care & development programs as Hook and Hub: Promising Practices in First Nations Communities*. University of Victoria, School of Child and Youth Care, Early Childhood Development Intercultural Programs. Retrieved from http://www.ecdip.org/docs/pdf/ECDIP%20report%20comp.pdf.

Ball, J., & Elliot, E. (2005). Measuring Social Support in Aboriginal Early Childhood Programs. In J. Whitehead (Ed.), *Research Connections Canada: Supporting Children and Families*, Vol. 12, pp. 41-58. Ottawa: Canadian Child Care Federation.

Barman, J., Hebert, Y., & McCaskill, D. (1986). The Legacy of the Past: An Overview. In J. Y. H. a. D. M. Barman (Ed.), *Indian Education in Canada, Volume 1: The Legacy.* Vancouver, British Columbia: UBC Press.

Barton, S. S., Thommasen, H. V., Tallio, B., Zhang, W., & Michalos, A. C. (2005). Health and Quality of Life of Aboriginal Residential School Survivors, Bella Coola Valley, 2001. *Social Indicators Research*, 73(2), 295.

Battiste, M. (1986). Mi'kmaq Linguistic Integrity: A Case Study of Mi'kmawey School. In J. H. Barman, Y.; McCaskill, D. (Ed.), *Indian Education in Canada, Volume 2: The Challenge* (pp. 107-125). Vancouver, British Columbia: UBC Press.

Battiste, M. (2000). *Reclaiming Indigenous Voice and Vision*. Vancouver, British Columbia: UBC Press.

Bennett, M., Blackstock, C., & De La Ronde, R. (2005). *A Literature Review and Annotated Bibliography on Aspects of Aboriginal Child Welfare in Canada* (2nd edition). Retrieved from http://www.fncaringsociety.com/sites/default/files/docs/AboriginalCWLitReview_2ndEd.pdf.

Benoit, C., Carroll, D., & Chaudhry, M. (2003). In search of a healing place: aboriginal women in Vancouver's downtown eastside. *Social Science & Medicine*, 56(4), 821(813)-834.

Borrows, J. (1994). Constitutional Law From a First Nation Perspective: Self-government and the Royal Proclamation. *University British Columbia Law Review*, 28, 1-47.

Bramley, D., Hebert, P., Jackson, R., & Chassin, M. (2004). Indigenous disparities in disease-specific mortality, a cross-country comparison: New Zealand, Australia, Canada, and the United States. *The New Zealand Medical Journal*, 117(1207), 1207-1215.

Bramley, D., Hebert, P., Tuzzio, L., & Chassin, M. (2005). Disparities in Indigenous Health: A Cross-Country Comparison Between New Zealand and the United States. *American Journal of Public Health*, 95(5), 844.

Brown, C. M., & Smirles, K. E. (2003). Examining the Bicultural Ethnic Identity of American Indian Adolescents. *American Indian Culture & Research Journal*, 29(3), Report: ED480493. 480427p. Retrieved from http://aisc.metapress.com/content/f64h8568h0hr6154/.

Cheshire, T. C. (2001). Cultural Transmission in Urban American Indian Families. *American Behavioral Scientist*, 44(9), 1528.

Corenblum, B. (1996). Development of identity in Native Indian children: review and possible futures. *Canadian Journal of Native Studies*, 16(1), 81-103.

Cox, S. (2002). *Early Childhood Development - models and studies*. Education Renewal Initiative Secretariat.

Dawson, J. (1988). "If My Children Are Proud": Native Education and the Problem of Self-Esteem. *Canadian Journal of Native Education*, 15(1), 43-50.

Frideres, J. S., & Gadacz, R. (2001). *Aboriginal Peoples in Canada: Contemporary Conflicts*, 6th Edition. Toronto, Ontario: Pearson Education Canada Inc.

Friedel, T. L. (1999). The Role of Aboriginal Parents in Public Education: Barriers to Change in an Urban Setting. *Canadian Journal of Native Education*, 23(2), 139-158.

Greenwood, M. (2001). An Overview of the Development of Aboriginal Early Childhood Services in Canada. *ERIC Document Reproduction Service* No. ED 456 954.

Greenwood, M., & Shawana, P. (2000). *Whispered Gently through Time. First Nations Quality Child Care: A National Study* (Vol. ED 462-224). Ottawa, Ontario, Canada: HRDC.

Hanselmann, C. (2001). *Urban Aboriginal People in Western Canada: Realities and Policies*. Canada West Foundation. Retrieved from http://cwf.ca/pdf-docs/publications/September2001-Urban-Aboriginal-People-in-Western-Canada-Realities-and-Policies.pdf.

Health Canada. (1998). *Taking Action on Population Health*. A Position Paper for Health Promotion and Programs Branch Staff. Ottawa: Population Health Development Division, Health Promotion and Programs Branch.

Health Canada. (2000). *Children Making A Community Whole: A Review of Aboriginal Head Start in Urban and Northern Communities*. Ottawa, Ontario: Childhood and Youth Division, Health Canada.

HighScope Curriculum. (2012). Preschool Curriculum Retrieved 11/01/12, 2012

Lalonde, M. (1974). *A new perspective on the health of Canadians*. Ottawa: Minister of Supply and Services Canada. Retrieved from http://www.phac-aspc.gc.ca/ph-sp/pdf/perspect-eng.pdf.

Leitch, K. (2008). *Reaching for the Top: A Report by the Advisor on Healthy Children and Youth*. Ottawa, Ontario: Public Health Agency of Canada.

Lertzman, D. A. (2002). Rediscovering rites of passage: Education, transformatin, and the transition to sustainability. *Ecology and Society,* 5(2), 30.

Longboat, D. (1986). First Nations Control of Education. In J. H. Barman, Y.; McCaskill, D. (Ed.), I*ndian Education in Canada,* Volume 2: The Challenge. Vancouver, British Columbia: UBC Press.

Mackay, R., & Myles, L. (1995). A Major challenge for the Education System: Aboriginal Retention and Dropout. In M. B. Battiste, J. (Ed.), *First Nations Education in Canada: The Circle Unfolds* (pp. 157-178). Vancouver, British Columbia: UBC Press.

May, S., & Aikman, S. (2003). Indigenous Education: addressing current issues and developments. *Comparative Education*, 39(2), 139.

Mendelson, M. (2006). *Aboriginal Peoples and Postsecondary Education in Canada*. Ottawa, ON: Caledon Institute of Social Policy.

Miller, J. (1991). *Skyscrapers Hide the Heavens: A History of Indian-White Relations in Canada* (Revised Ed.) (Vol. Revised). Toronto, Ontario: University of Toronto Press.

Mishibinijima, J. (2004). *Uneasy Balance: Aboriginal Identity in Leadership Development*. (Masters), Kingston, Ontario.

National Indian Brotherhood. (1972). *Indian Control of Indian Education*. In N. I. Brotherhood (Ed.). Ottawa, Ontario.

Newbold, K. B. (1998). Problems in Search of Solutions: Health and Canadian Aboriginals. *Journal of Community Health*, 23(1), 59-74.

Palmantier, M. (2005, 2005). *Building a Community of Communities*. Paper presented at the Results & Discussion of the National Roundtable on Aboriginal ECD: What Can Research Offer Aboriginal Head Start.

Physicians for a Smoke-Free Canada. (2008). *Health Effects of Chemicals Found in Cigarette Smoke*. Retrieved 01/03/08, 2008, from http://www.smoke-free.ca/health/healththeeffectssmoke.htm.

Posluns, M. (2007). Some First Nations Policy Developments in Canada: Several Recent Developments Beyond the Grasp of Government. *Indigenous Policy*, 18(1).

Public Health Agency of Canada. (2000). *Children Making a Community Whole: A Review of Aboriginal Head Start in Urban and Northern Communities*. Retrieved from PHAC Publications website: http://publications.gc.ca/collections/Collection/H39-532-2000E.pdf.

Smith, L. T. (1999). *Decolonizing Methodologies: Research and Indigenous Peoples*. Dunedin, New Zealand: University of Otago Press.

Stonechild, B. (2006). *The New Buffalo: The Struggle for Aboriginal Post-Secondary Education in Canada*. Winnipeg, Manitoba: University of Manitoba Press.

Tjepkema, M. (2002). *The Health of the Off-reserve Aboriginal Population*. Ottawa, Ontario.

Turner, D. (2006). *This is Not a Peace Pipe: Towards a Critical Indigenous Philosophy*. Toronto, Ontario, Canada: University of Toronto Press Inc.

Weaver, S. M. (1981). *Making Canadian Indian policy: The hidden agenda, 1968-1970*. Toronto: University of Toronto Press.

Wotherspoon, T. (2004). *The Sociology of Education in Canada: Critical Perspectives* (2nd Edition). Toronto, Ontario: Oxford Press.w